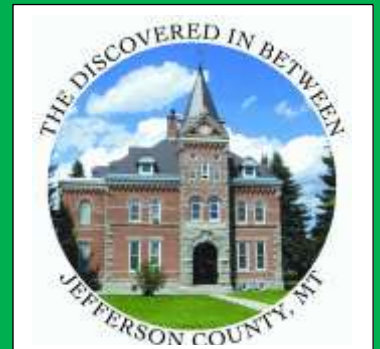


2012

Jefferson County Community Health Assessment



Photo provided by The Boulder Monitor



What is a Community Health Assessment?

This assessment is a tool that analyzes the health of a community, and what resources are available for improving health. This allows health related organizations to see how their services are impacting their community, as well as areas needing assistance. This assessment is led by the Jefferson County Public Health Department, and conducted by AmeriCorps volunteers. This assessment has been completed using the MAPP framework.

What is MAPP?

MAPP, or Mobilizing for Action through Planning and Partnerships, is a tool developed by NACCHO to conduct community health assessments. MAPP contains 6 phases that guide the assessment through

- *Organizing for Success
- * Creating a Vision statement
- *Conducting four health assessments including,
 - *Community Health Status
 - *Community Themes and Strengths
 - *Local Public Health System
 - * Forces of Change
- *Strategic Issue Identification
- *Formulation of Strategic Plans and Goals
- *Action Cycle

Vision Statement

Several residents have created this vision statement to guide the MAPP process. This statement will be used to guide the strategic planning, and actions of The Health Department, and other partners involved with the assessment.

“A caring and compassionate community that is responsive to the county’s citizens in a changing world, while maintaining a rich quality of life reflecting the rural essence of Jefferson County.”

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Community Health Status Assessment

2012

This assessment is a collection of data from reputable sources that seeks to answer how healthy our residents are. Categories of interest include demographics, socioeconomics, causes of death, disease, environmental health, maternal health, mental health, behavioral risk factors, and social health

Overview of Jefferson County

Jefferson County is located in the southwest portion of Montana between Silver Bow and Lewis and Clark County. The county has 1,656.7 square miles of land area and 2.2 square miles of inland water area ¹. Established in 1865, Jefferson County is located in southwest Montana with a population of 11,406 according to the 2010 census ². There are 6 main communities in the county: Montana City, Clancy, Jefferson City, Boulder, Basin, and Whitehall. Boulder is also the county seat.



Jefferson County is a rural county and historically has an economy of mining and ranching. Although there are several ranches scattered throughout the county, the number of mines in the country have dwindled over the years, leaving several ghost towns in their wake. Today there is one mine open; The Golden Sunlight Mine near Whitehall. Other abandoned mines have been converted into radon health mines, drawing in tourists from all over the world for their claimed health benefits.

People have chosen to settle into Jefferson County due to its rural nature and lower living costs. They can easily commute into Butte or Helena for work. In Boulder, The Montana Development center also provides job opportunities working in adult supervision, troubled youth, and meth treatment for women.

Incorporated towns include Boulder and Whitehall, and other communities include Basin, Cardwell, Jefferson City, Clancy, and Montana City. Interstate 15 and 90 and MT state 69 and 55 connect the county. These highways are heavily traveled by trucks, and pose a potential hazmat threat as they travel through narrow winding mountain highways.

Demographics

Table 1: Overall Population

	2000	2010	% change Jefferson County	% change in Montana	% change in USA
Population	10,049	11,406	+13.5%	+9.6%	+9.7%

U.S. Census Bureau ²

Table 2: Race

Population Group	County	Montana	U.S.A
White	96.4%	90.0%	80.0%
American Indian or Alaskan Native	1.4%	6.3%	1.0%
Asian	0.4%	0.7%	4.4%
Black or African American	0.1%	0.6%	12.8%
Other	1.7%	2.4%	1.8%

U.S. Census Bureau 2007

Reporting Hispanic Origin	1.7%	2.8%	15.1%
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U.S. Census Bureau '07. Hispanic Origin is considered separate from race ⁴

Other Facts

Median Age ('10):

Jefferson: 46.2
Montana: 39.8
USA: 37.2³

Population per Square Mile ('10):

Jefferson: 6.9
Montana: 6.8
USA: 87.4²

Percent Pop. in Poverty ('09):

Jefferson: 8.6%
--Children: 12.8%
Montana: 15.0%
USA: 14.3%²

Table 3: Age Ratio

Age	County		Montana		USA	
	2010 (% of population)	% Change Since 1990	2010 (% of population)	% Change since 1990	2010 (% of population)	% Change Since 1990
0-4	5.1%	-2%	6.3%	-1.2%	6.5%	-1%
5-17	18%	-4.3%	16.3%	-4.4%	17.4%	-0.7%
18-64	62.8%	+2.6%	62.6%	+4.1%	63.1%	+1.1%
65+	14.1%	+3.7%	14.8%	+1.5%	13%	+0.6%

U.S. Census Bureau ²**Table 4: Unemployment**

	Jefferson County	Montana	USA
2010	6.8%	7.9%	9.6%
2000	5.7%	5.9%	4.0%

U.S. Bureau of Labor ¹⁰**Table 5: Education**

	Jefferson County	Montana	USA
% 25+ High School Grads	90.9%	90.4%	84.6%
% 25+ Bachelor's Degree+	31.3%	27%	27.5%

U.S.A. Census Bureau. U.S.A Quick Facts ²**Table 6: Median Household Income**

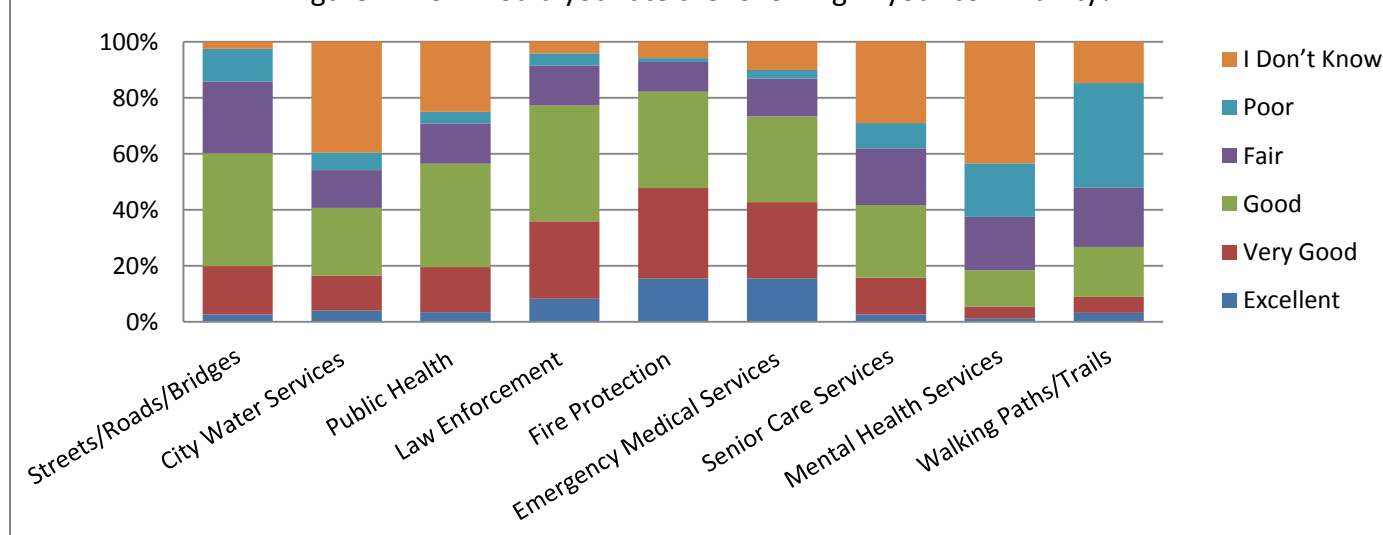
	Jefferson County	Montana	USA
2009	\$54,242	\$42,222	\$50,221

U.S.A. Census Bureau. U.S.A Quick Facts ²**Average Household size ('05-'09)**

Jefferson: 2.35

USA: 2.60 ²**Living in same house 1+ years ('05-'09):**

Jefferson: 85.2%

USA: 83.8% ²**Percent of pop. on Medicaid ('09): 6%**Jefferson is ranked 1st in Medicaid expenditures per enrollee of all MT counties ⁵**Percent of pop. on SNAP ('09): 5.45% ⁶****Percent of pop. on TANF ('09): 0.47% ⁶****Percent of pop. under 65 without health insurance ('09): 19% ⁷****Average # Children on free or reduced lunch ('06-'10): 394. ⁸****County Health Rankings for Montana 2012 ⁹**Income 1stHealth Factors 4thHealth Outcomes 11th**# of Households in County ('05-'10): 4,428 ²****# of Veterans Living in County ('05-'09): 1,339 ²****Percentage of Montanans reporting they have a disability: 26% BRFFS 2010 ¹¹****Percent of County Residents 21+ with a disability ('09?): 15% ⁷****Mean travel time to work 16+ ('05-'09): 19.6mins ²****Top 3 concerns of County Residents (12) ¹²****Drug Abuse** 33.6%**Alcohol Abuse** 32.9%**Youth Activities** 26.5%**Figure 1: How would you rate the following in your community?**Jefferson County Health Needs Assessment ⁹

Leading Causes of Death

Table 7: Cause of Death Jefferson County

Cause of Death	Rate per 100,000 people		
	Jefferson	Montana	USA
Heart Disease	124	191.1	199.8
Cancer	217.4	208.7	192.1
Unintentional Injury	73.7	87.3	60.0
Liver Disease and Cirrhosis	7.3*	16.1	12.6
CLRD	43.1	64.1	43.2
Suicide	34.9	20.5	11.3
Stroke	*	27.0	24.4
Diabetes	33*	27.1	24.3

CDC, National Center for Death Statistics, 2004-08¹³. *Denotes data suppressed or unreliable by CDC. In this case data was used from County Health Profiles 09⁷.

Quick Facts

Motor Vehicle Death Rate per (100,000):

Jefferson 31.2

Montana 25.5¹³

Cancer Rate of Occurrence (per 100,000):

Jefferson: 411.3

Montana: 455.5¹³

Suicide Rate (per 100,000):

Jefferson: 12.8

Montana: 20.3¹³

Infant Mortality (Deaths per 1,000 Live Births):

Jefferson: 8.1

Montana: 6.1¹³

Median Age at Death in MT: 78 years¹⁴

Amount of Montanans who die each year from Tobacco related diseases-1,400¹⁵

More than any other preventable cause

Table 8: Leading Cause of Death by Age Group in Montana

Age Group	No.1 Cause	No.2. Cause	No.3. Cause
Infants under age 1	Conditions originating in perinatal period (33%)	Birth Defects (24%)	Sudden Infant Death Syndrome (17%)
Children 1-4	Unintentional Injury (38%) Motor Vehicle (17%) Other (21%)	Birth Defects (9%)	Cancer (7%)
Children 5-14	Unintentional Injury (43%) Motor Vehicle (40%) Other (14%)	Cancer (13%)	Suicide (12%)
Young Adult 15-24	Unintentional Injury (56%) Motor Vehicle (19%) Other (15%)	Suicide (21%)	Homicide (5%)
Adults 25-44	Unintentional Injury (34%) Motor Vehicle (19%) Other (15%)	Suicide (16%)	Cancer (9%)
Adults 45-64	Cancer (30%)	Heart Disease (20%)	Unintentional Injury (10%) Motor Vehicle (4%) Other (6%)
Elderly 65-84	Cancer (30%)	Heart Disease (21%)	Chronic Lower Respiratory Disease
Elderly 85+	Heart Disease (27%)	Cancer (12%)	Stroke (8%)

Montana Vital Statistics 2009¹⁴

Chronic Diseases

Table 9: Chronic Diseases

Disease	Southwest Region	Montana	USA
Currently have Asthma	8.7%	9.1%	9.0%
Ever told they have Diabetes	5%	7%	8.7%
Told they had a Heart Attack	4.2%	4.5%	4.1%
Told they had a Stroke	2.2%	2.7%	2.6%

Calculated as percent self-reported with disease from adults on BRFFS Survey 2010.

11+16

Table 10: Chronic Disease Risks

Risk Factor	Southwest Region (*Jefferson)	Montana	USA
<5 Fruits and Veggies a day	74.9%	76.5%	76.6%
Overweight	37.5%	38.0%	25.1%
High Cholesterol	35.2%	33.4%	36.0%
High Blood Pressure (Ever told)	25.1%	27.7%	20.5%
Have never had their blood cholesterol checked	22.6%	22.9%	19.5%
Obesity	19.8%	21.6%	25.1%
Physical Inactivity	21%*	21%	23.2%
Smoking	19%*	18.8%	20.1%
Binge Drinking in Last 30 days	13%*	24.6%	15.6%

Percentage of adult population exhibiting behavior, as self-reported to BRFFS 11+16. Numbers marked with * are from County Health Rankings, 2011₉.

Percentage of Jefferson Residents who have seen a primary care provider within the last 2 years: **14%** ₁₂

Percent of Residents who say there are plenty of activities in which to get exercise in their community: **31%** ₁₂

Percent of Residents who say that they would exercise more if there were better walking paths: **49%** ₁₂

Percent of Residents who perform self-exams for cancer: **23%** ₁₂

Percent of Residents who get regular cancer screenings: **61.4%** ₁₂

Communicable Disease

Table 11: Diseases Transmitted Person-Person

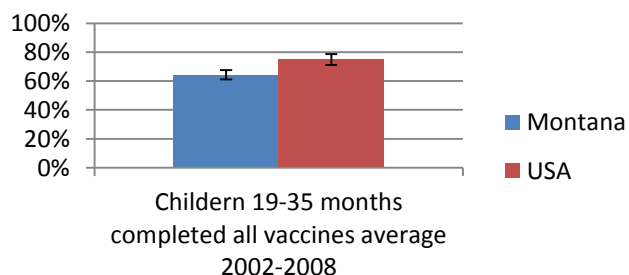
	2008	2009	2010
Chlamydia	14	19	14
Varicella	8	3	0
Campylobacter	2	1	0
Giardia	0	1	0
Hep C	1	0	0

MT DPHHS Communicable Disease Reports Jefferson County ₁₇.

Table 12: Diseases Transmitted by Food, Water, & Animals

	2008	2009	2010
Varicella	8	3	0
Pertussis	0	0	0
Gonorrhea	0	0	0
Syphilis	0	0	0
TB	0	0	0
Chlamydia	14	19	14
Hep C	1	0	0

Figure 2: Percent of Children Completed 4:3:1:3:3:1:4 Series



Immunization Survey Ages 19-35 months 2010 ₁₈.

Table 13: Immunization of County Children

	Jefferson County	Montana
% children with religious exemption	3.2%	1.9%
% 2 doses MMR	95.7%	97.4%
% 3+ doses of IPV/OPV	96.2%	95.9%
% 4+ doses of DTP/DTAP	95.9%	97.1%

Includes JHS, BES, Basin, Clancy, and Cardwell schools. School Nurse Report to Health Board April 2012 ₁₉

Environmental Health

Table 14: Air Quality

Year	Outdoor Air Quality		
	Good	Watch	Poor
2010	330	24	11
2009	361	4	0
2008	350	8	8

Lewis & Clark County Health Department ²⁰

There are no local air quality control stations in Jefferson County. The closest stations that monitor air our residents would encounter are in Lewis and Clark County and Silverbow County. Due to county's topographical features, it is hard to compare air quality to other counties, but in order to provide some relevant information we included Lewis and Clark's data based on elevation.

2002-2011 Air Quality Definitions

Good: 0-40 $\mu\text{m}/\text{m}^3$ avg. over a 24 hr. period with good dispersion

Watch: 40-75 $\mu\text{m}/\text{m}^3$ avg. over a 24 hr. period

Poor: 60-75 $\mu\text{m}/\text{m}^3$ avg. over a 24 hr. period with moderate to poor dispersion

Table 15: Septic Permits

	Individual Permits		Minor Subdivisions
July 11-March 12	54	Jan 11-Dec 12	11
July 10-June 11	72	Jan 10-Dec 11	20

Sanitarian's Report to the Health Board ²¹

Dog Bites

5 investigations since Jan 12-Sanitarian

Table 16: Junk Vehicles

	July 11-March 12	June 10-July 11
Junk Vehicles Towed	58	42

Sanitarian's Report to the Health Board ²¹

Basin Superfund

The Department of Environmental Quality (DEQ) and the Environmental Protection Agency (EPA) have shared responsibility for the reclamation and closure at Basin Creek Mine, located at the headwaters of the Basin Creek drainage. The property consists of a United State Forest Service permit area which surrounds 1200 acres of private, patented claims, owned by the State (DEQ).

Reclamation work at the Basin Mine site has included, placing an impermeable cap on Leach Pad 1 (LP-1), planting of 7400 Lodge Pole Pines, reclaiming over 3 miles of mine roads throughout the site, reclaiming of 6 storm water ponds, and reseeding over 40 acres of disturbed ground. DEQ maintains and operates a water treatment system at the site to treat the discharge from LP-1. DEQ also maintains storm water control throughout the site and provides site security to protect the general public and on-going reclamation.

The EPA has tested and cleared domestic water sources on the Basin Creek side and Cataract Creek side for heavy metals and arsenic. A total of 13 landowners participated in the sampling activity and results showed that all arsenic, cadmium and lead concentrations were below their respective regulatory levels. Limited removal action at Bullion mine started in September 2002 and ended in October 2004.

There is no timeline for completion of projects for either group. The completion will depend primarily on priority need and funding. Right now there is low risk of human exposure to contaminant from past mining projects at this location.

Maternal Health

Table 17: Infant Births and Deaths

	Rate per 1,000 live births		
	Jefferson County	Montana	U.S.
Infant deaths, age 0-1	8.1	6.1	6.7
Births to adolescents (15-17 yrs. old)	21.3	29.2	21.9
	Percentage of all births		
	Jefferson County	Montana	U.S.
Premature births (under 37 weeks gestation)	8.5%	10.1%	12.6%
Low birth weight	8%	7.3%	8.2%
Teen Birth rate	8.3% *	3.9%€	3.9%¥

Office of Vital Statistics (US and MT), DPHHS, ^{13+14.} *Montana Kids Count 05-09 ^{8.} € CDC average 09-07 ^{21.} ¥CDC Fast stats ^{22.}

Table 18: Prenatal Care

	Jefferson County	Montana	U.S.
Mothers entering prenatal care in 1 st trimester	83.7%	83.9%	31.2%
Mothers smoked during pregnancy	14.8%	18.3%	11.2%
Gestational diabetes (percent of live births)*	4.3%	2.5%	4.6%

Office of Vital Statistics (US and MT), DPHHS, 03-07 ^{13+14.} * Denotes 04-08.

Mental Health

Table 19: Adult Mental Health

Adults	South West Region	Montana
Adults reporting general health status as fair or poor	12.5%	13.6%
Adults reporting 14+ days of "not good" mental health in the last 30 days	8.1%	8.8%

Montana BRFSS, 2003-2004 averages ^{6.}

Adults	Southwest Region	Montana
How often do you get the emotional support you need? (Always/Usually)	82.9%	81.3%

Montana BRFSS, 09-10 averages ^{6.}

Table 20: Child Mental Health

Youth	Jefferson County	Montana
High school students seriously contemplating suicide	20.4%	16.8%
High school students attempting suicide	14.5%	8.4%

Montana Youth Risk Behavior Survey 03, 05, 07, 09, 11 Averages ^{23.}

Youth	Jefferson County	Montana
High School Students reporting being bullied on school property in last 12 months.	28.7%	24.6%

Montana Youth Risk Behavior Survey 09, 11 Averages ^{23.}

Southwest Region adults surveyed who report limited in activities due to mental, physical, or emotional problem: 21.2% ¹¹
Percent of Jefferson County Residents who state they are often lonely or sad: 10.1% ¹²

Oral Health

Table 21: Time Since Last Visit to Dentist

Time since last visit to dental hygienist or dental clinic	
Within a year	67.3%
Within 2 years	11.7%
Within 5 years	9.2%
5+ years	11.5%
Never	0.3%

Montana BRFSS 2010, Southwest Region
Averages 06, 08, 10¹¹

20 basin students receive fluoride treatments from health department staff. About 80 students from Boulder Elementary receive treatments.

Dental screenings are done on all elementary school kids by health department staff, and dental volunteers.

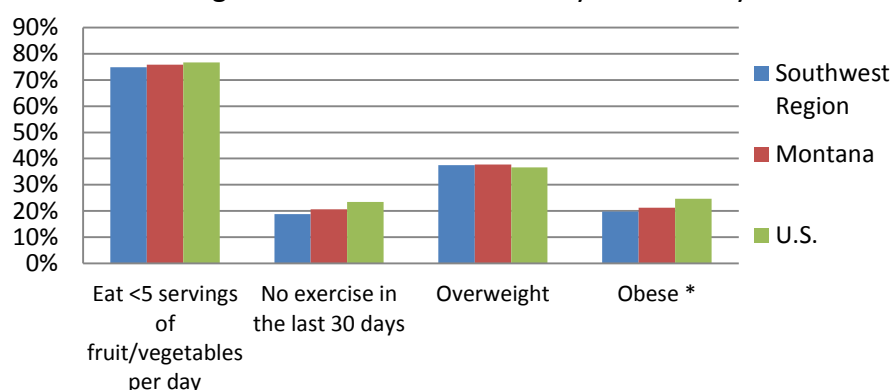
Behavioral Risk Factors

Many health problems are directly related to our behaviors and how we live our lives. For example extra weight, lack of exercise, and smoking are both shown to increase the likelihood of developing heart disease. Behaviors exhibited as a child are often mimicked in adulthood, and many smokers and heavy drinkers begin at an early age.

The Southwest Region like much of the nation and the greater Montana have high rates of people overweight and obese, as well as poor eating and exercise habits.

31% of County Residents said there were plenty of activities for exercise in their community⁵. 49% say they would exercise more if there were more trails in their community¹².

Figure 2: Adult Nutrition & Physical Activity



BRFSS 2003-2008 averages *Region data is an average of '03-'07¹¹⁺¹⁶

Figure 3: There are plenty of activities in which I can get exercise in my

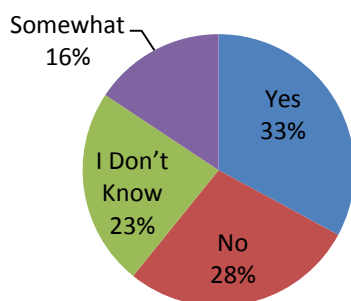
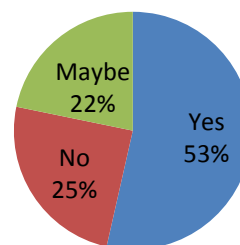


Figure 4: Would you exercise more if there were safer, or more numerous walking paths or trails?

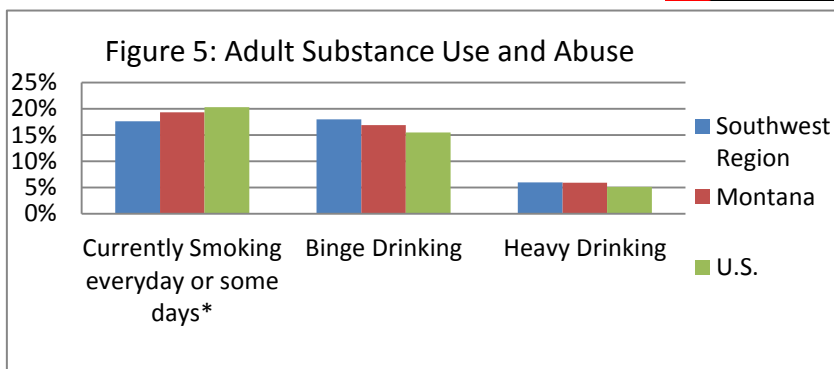


Jefferson County Health Needs Assessment¹²

About 1 in 3 residents believe that are plenty of activities to get exercise. About a quarter of residents do not, another quarter don't know (Fig. 3). About a half of residents would exercise more if walking paths were improved or added to (Fig. 4).

Comparing this region to the state and nation, there is a slightly lower rate of smoking and a slightly higher rate of binge and heavy drinking.

74.7% and 78.1% of county respondents agreed, or strongly agreed that alcohol abuse and drug abuse were issues in this county. ¹²

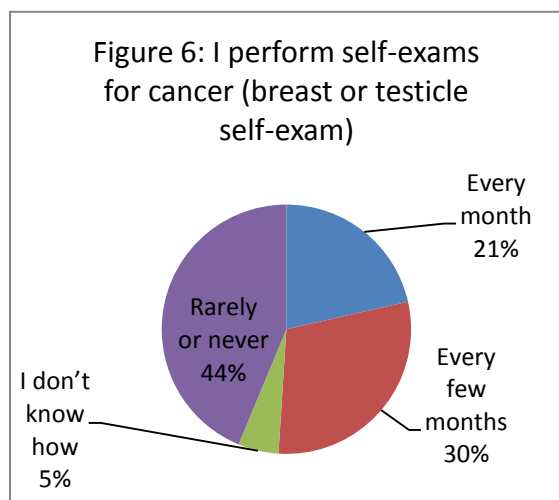


BRFFS 2003-2008 averages *Region data is an average of 03-07 ¹¹⁺¹⁶

Table 22: Adults Who Received Age Appropriate Cancer Screening

	Southwest Region	Montana	U.S.
Women 18+ Pap Test in past 3 years	83.3%	81.5%	82.8%
Women 40+ Mammogram in past 2 years	69.1%	71.8%	76.0%
Adults 50+ Blood Stool test in past 2 years	78.8%	21.2%	20.9%
Adults 50+ Have had a colonoscopy or sigmoidoscopy	55.8%	56.5%	61.8%
Males 40+ Have had a PSA in past 2 years	43.7%	55.6%	54.8%

BRFFS 2004, 2006, 2008, 20010 Averages ¹¹⁺¹⁶



Jefferson County Health Needs Assessment¹²

Around 56% of county residents say that they receive appropriate cancer screenings for their age (Fig. 7).

About 11% get some of these cancer screenings or not as often as they should. Only 21% perform self-exams for cancer every month (Fig. 6).

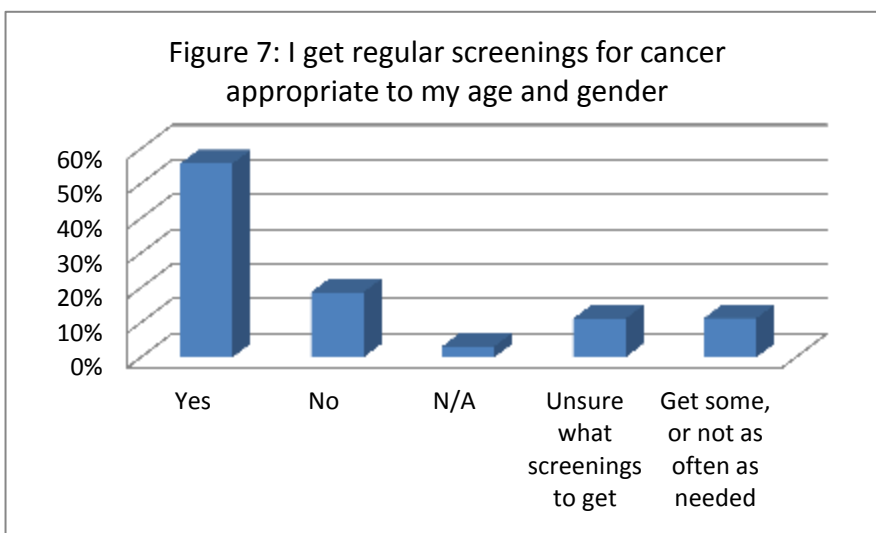


Table 23: Unintentional Injury of Adults

	Montana
Occasionally or never wear a seatbelt	10%
Fell 1 or more times in the past 3 months	21.9%
Of those who fell, number injured	30.6%

BRFFS 2010 ¹¹

Figure 8: I wear a helmet when riding a bicycle, motorcycle, or ATV.

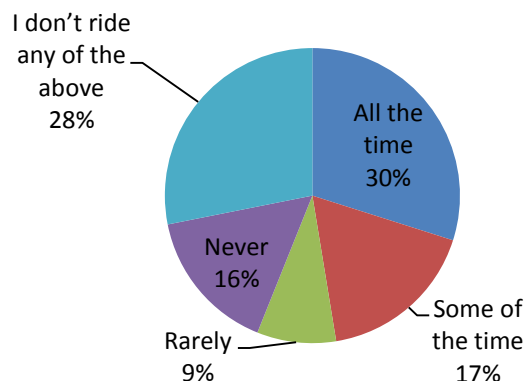
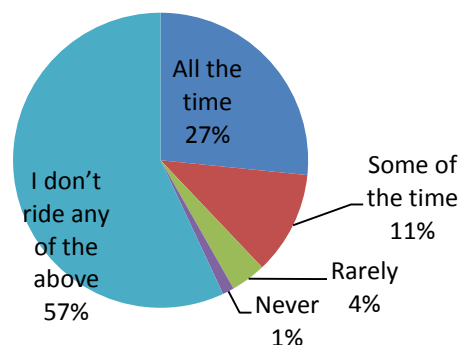
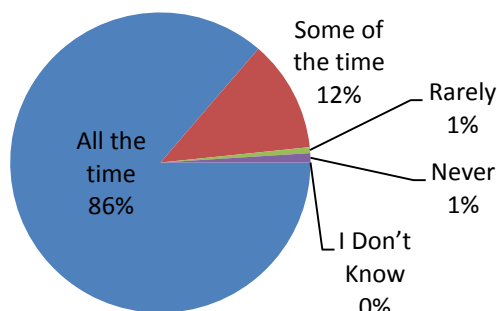


Figure 9: My kids wear a helmet when riding a bike, motorcycle, or ATV.



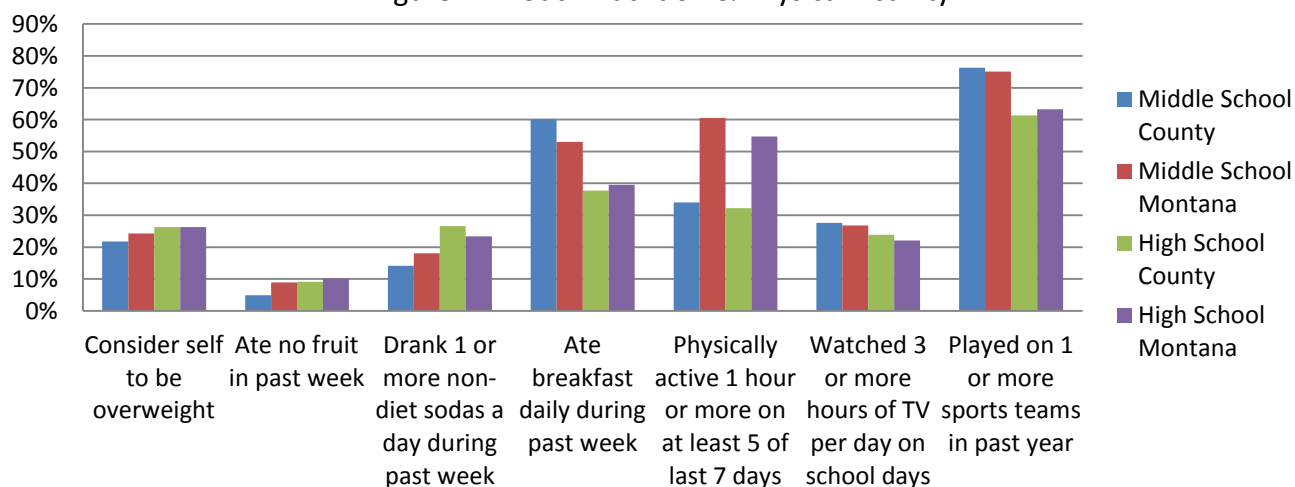
Jefferson County Health Needs Assessment₁₂

Figure 10: I wear a seatbelt



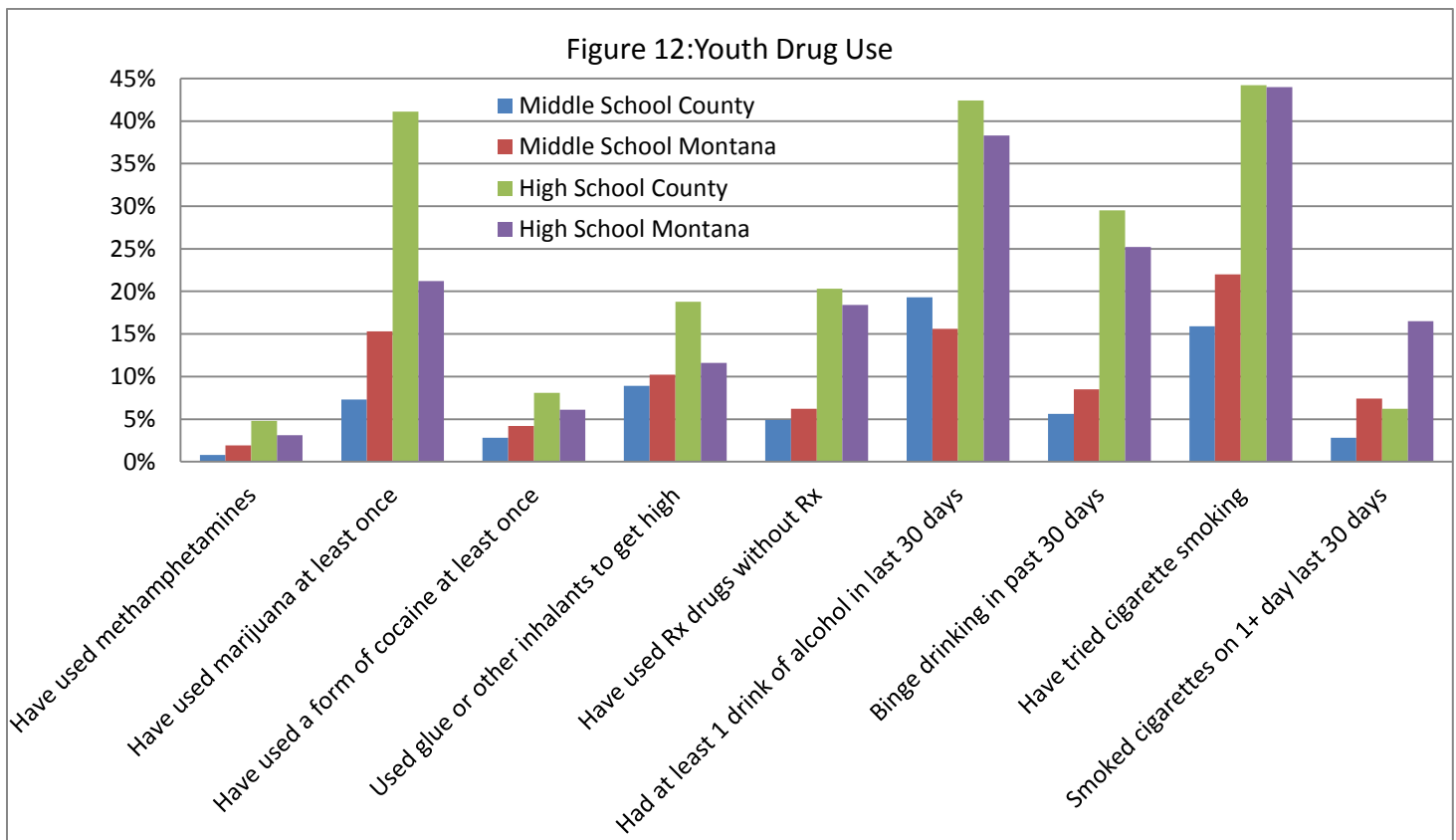
Most residents and their children do not ride bikes, ATVs, or motorcycles (34% and 64%, respectively, Fig. 8 & 9). While 24% of residents and 19% of kids always wear a helmet, about 85% always wear seatbelt (Fig. 10).

Figure 11: Youth Nutrition & Physical Activity



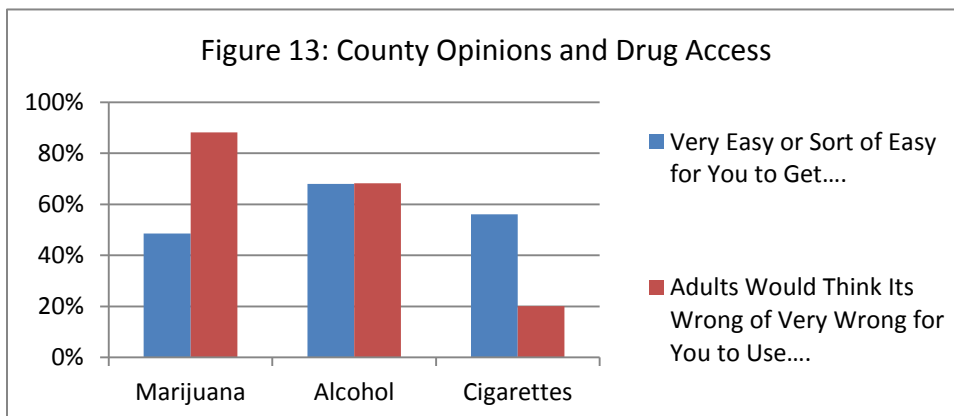
Youth Risk Behavior Survey 2011₂₅

Students in the county and state tend to share the same dietary and physical activity habits, such as eating low amounts of fruit, drinking lots of daily soda, watching many hours of TV, or participating in sports. Compared to statewide students, county middle and high school students are not as physically active. While our county middle school students tended to eat breakfast more frequently than their state counterparts, there is a marked drop in students eating breakfast everyday in high school in both the county and state populations.



YRBS 2011²⁵

While county middle school students tend to use drugs less than middle school students statewide, about twice as many county high school student have used marijuana, methamphetamines, or used glue or other inhalants compared to high school students statewide. High school students county and statewide have tried cigarettes at relatively the same rate, but students who smoked in the last 30 days is much lower than the rest of the state.

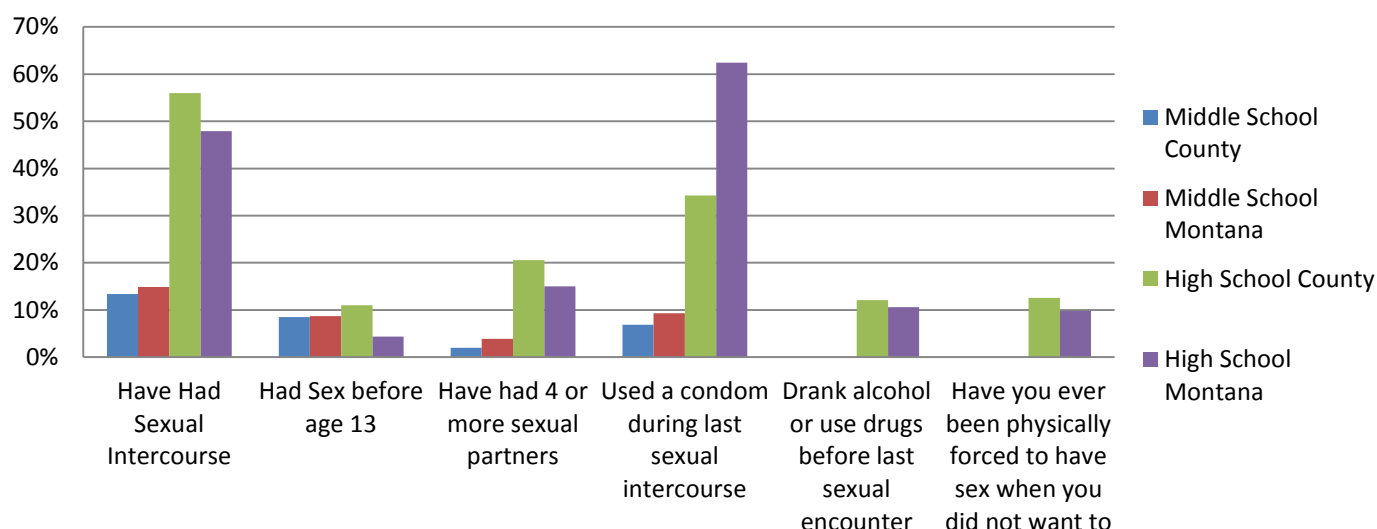


Prevention Needs Assessment 2010²⁶

About 1 and 2 students believe it is easy to get marijuana, alcohol, or cigarettes, despite adults feeling it wrong for youth to use them.

Fewer adults think it's wrong to drink alcohol, and even fewer think it's wrong to smoke.

Figure 14: Youth Sexual Behaviors

YRBS 2011²⁵

A higher percentage of our county high school students report having had sexual intercourse before than the state. In addition, a higher percentage of county high school students also report having sex before the age of 13. And they report much less condom use than the high school students in the rest of the state. Our county also has a higher percentage of high school students reporting that they have had 4 or more sexual partners, used substances before their last sexual encounter, and have been physical forced to have sex.

Social Health

The area we live in and the people we interact with vastly impact our health. Our peers can positively influence us towards productive behaviors, and encourages personal growth. Social support systems can lower the effects of stress, helps us recover from diseases faster, and help us to live longer. On the other hand those with poor social ties are more likely to participate in crime, or other high risk behaviors. Social isolation is a strong risk factor for disease.

Crime Data: Jefferson County's 5 most reported crimes (counts)

Larceny (45) DUI (44) Drug Offenses (38) Disorderly Conduct (33) Vandalism (33)

Montana Board of Crime Control 2009²⁷

Table 24: Averaged crime rate 2008-10 per 100,000 population

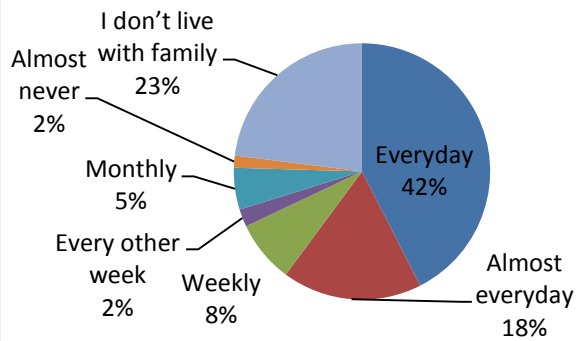
	Rape	Aggravated Assault	Drug Offenses	DUI	Liquor Law Violations	Burglary/Breaking and Entering	Vandalism	Larceny	Homicide/Negligent Homicide
Jefferson County	29.2	119.8	166.6	29.3	154.9	114	251.3	368.2	0
Montana	35.6	348	271.5	466.9	420.4	328	1146	1980	3
United States	28.8	264	*	*	*	716.8	*	2078	5

Crime in the United States, U.S. Department of Justice Federal Bureau of Investigation²⁸, and Montana Board of Crime Control²⁷.

Crime rate was calculated as Average Reported # of Crime/ (Population/ 100,000).

Larceny and vandalisms have the highest rate of occurrence in the county and state.

Figure 15: How often does your family spend quality time together?



Almost half of our county residents report spending quality time with their family every day, or almost every day.

Jefferson County Health Needs Assessment ¹²

Figure 16: If I was having a rough time there are people I could reach out to for help

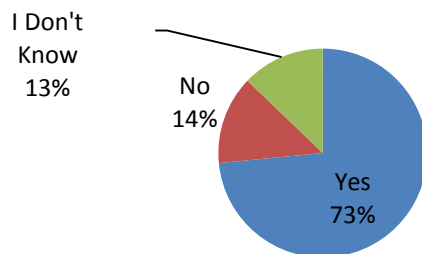
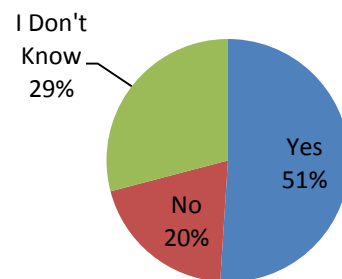


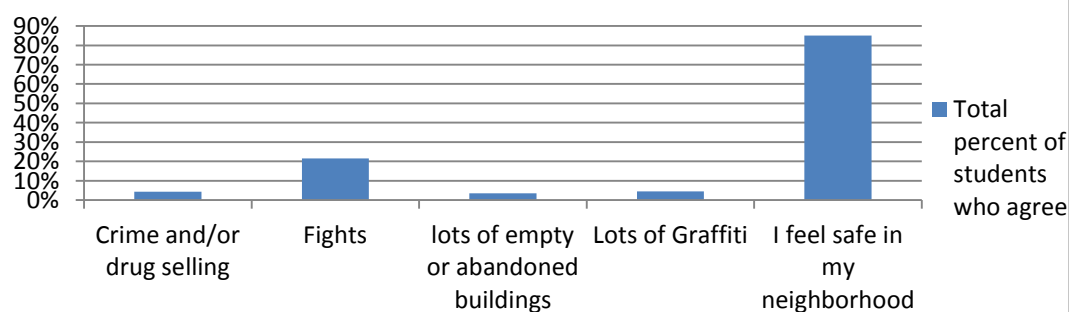
Figure 17: I feel like my COMMUNITY cares about me.



Jefferson County Health Needs Assessment ¹²

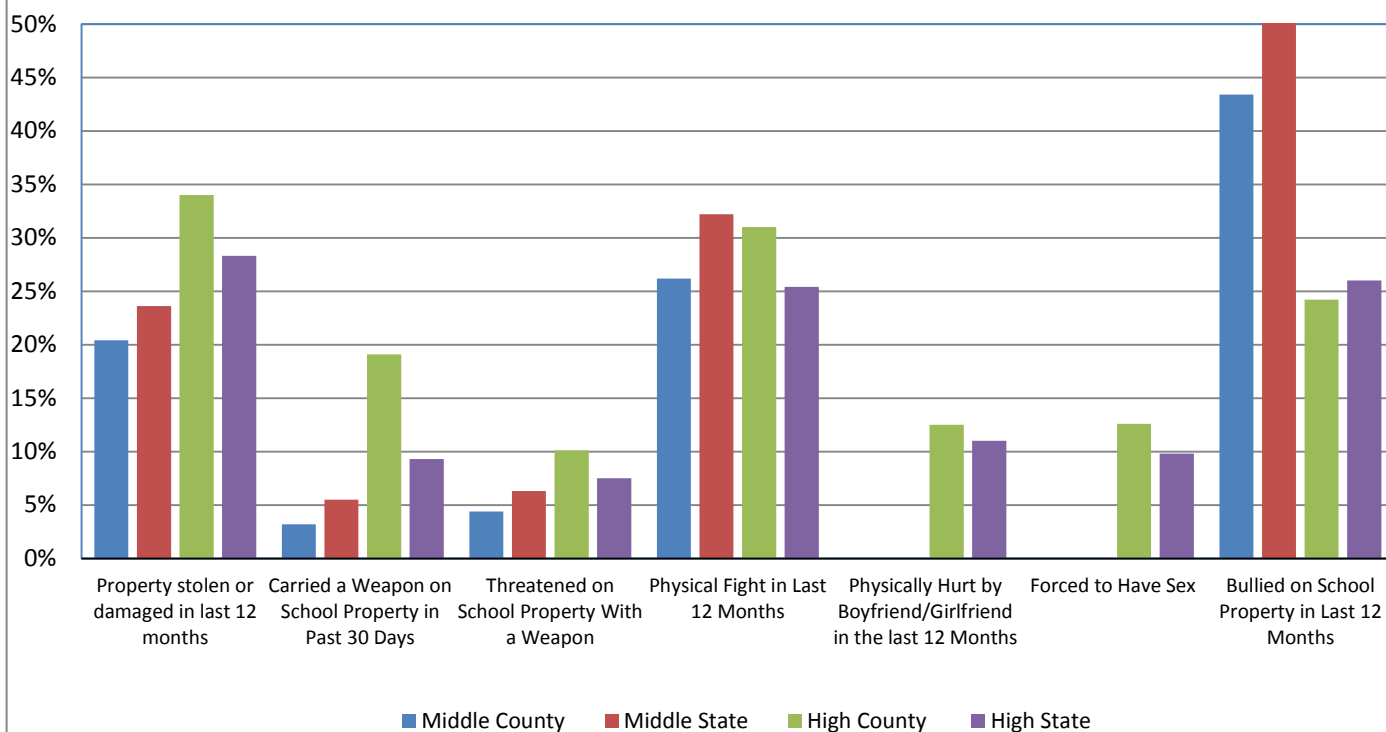
Almost $\frac{3}{4}$ of residents surveyed said that they could get help from members of the community if they needed it (Fig. 16), and over half feel like their community cares about them (Fig. 17). Social ties can help prevent depression and help individuals adjust to sudden stressful changes in their life.

Figure 18: Total Percent 8th, 10th, and 12th Graders Who Say the Following Describes Their Neighborhood



PRC-Prevention Needs Assessment ²⁶

Figure 19: Reporting Behaviors




Youth Risk Behavior Survey Jefferson County 2011²⁴

County middle school students report less stolen or damaged property, carrying weapons, threatened by a weapon, fights, and bullying than middle school students statewide. However, county high school students report those behaviors more than students statewide excluding bullying. Our county high school students are much more likely to carry a weapon on school property, or forced to have sex.

County Health Rankings 9

This project serves to rank counties by the community factors that influence health. This ranking system is done every year with defined measurements to rank counties in terms of how well their community encourages a healthy lifestyle. It is important to note that these guidelines are just measurement used to gauge the health of a community, and is best used to look at trends over time in order to address problems in the community.

Legend:  = Improvement of more than 5 rankings

 = Decline of more than 5 rankings

	2010* Rank	2011 Rank	2012 Rank	Change in Rank from 2010 to 2012
Health Outcomes	13	16	11	2
Health Factors	3	13	4	-1
Mortality	15	17	12	3
Morbidity	13	15	20	-7
Health Behaviors	12	15	5	7
Clinical Care	10	12	6	4
Social & Economic Factors	3	23	16	-13
Physical Environment	12	25	22	-10
Tobacco Use	21	24	21	0
Diet and Exercise	11	13	3	8
Alcohol Use	10	8	6	4
Sexual Activity (*Sexual Behavior)	2	5	8	-6
Access to Care	16	19	6	10
Quality of Care	10	11	12	-2
Education	7	45	43	-36
Employment	18	28	17	1
Income	2	2	1	1
Family and Social Support	18	10	11	7
Community Safety	9	12	12	-3
Air Quality (*Environmental Quality)	30	20	21	9
Built Environment	10	27	25	-15

Average

-1.8

Comparing Jefferson County to Healthy People 2020 Objectives ²⁹

Healthy People 2020 are a series of science based, 10 year objectives for improving the health of American citizens. These goals serve as a guide for focusing health improvement efforts. Below we have pulled out some goals and data to compare with Jefferson County. In some cases specific data for Jefferson County is not available, and data from the southwest region of Montana, or data for the whole State were used. Unless otherwise noted assume local data is from Jefferson County.

Key for Colors

- = Our County is doing much better than the goal set by 2020
- = Our County is performing around goal set by 2020
- = Our County is doing much worse than the goal set by 2020

Access to Health Services

	Local	National	2020 Goal	Difference between Local and 2020 Goal
% Population with health insurance	81.0%*	83.2%	100%	-19.0%
% Population with a primary care	82.0%¥	76.3%	83.9%	-1.9%

*Percent of population under 65 with health insurance ⁷, ¥ Respondents who have had a physical in the last 2 years ¹²

Adolescent Health

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Percent of 4 th Grade Students reading at or above NAEP proficient reading standards	36% MT*	33%	36.3%	-0.3%
Percent of 8 th Grade Students reading at or above NAEP proficient reading standards	42% MT*	32.4%	35.8%	6.2%
Percent of 4 th Grade Students performing math at or above NAEP proficient standards	45% MT*	39.1%	43%	2%
Percent of 8 th Grade Students performing math at or above NAEP proficient standards	46% MT*	33.9%	37.3%	8.7%
Percent of students achieving a high school diploma in 4 years	97.26% €	74.9%	82.4%	14.86%
Percent of Students who have been offered, given, or sold illegal drugs on school property	27.3% ¥	22.7%	20.4%	7.3%
Percent of students who have an adult they can talk to 12-17	41.2% £	75.7%	83.3%	-42.1%

*NAEP State Snapshots 2011²⁷, € averaged 04-09 MT Kids Count ⁸, ¥ Youth Risk Behavior Survey ²³, £ 8th 10th, and 12th graders who had an adult in neighborhood they could talk to. Prevention Needs Assessment ²⁴

Cancer Prevention

	Local	National	2020 Goal	Difference between Local and 2020 goal
Reduce Cancer Death Rate (per 100,000)	217.4*	178.4	160.6	56.8
Cervical cancer screening	83.3% SW Region €	84.5%	93.0%	9.7%
Colorectal screening	78.8% Blood Stool Test	54.2%	70.5%	8.3% Blood Stool Test
	55.8% Colonoscopy SW Region €			-14.7% Colonoscopy
Breast cancer screening	69.1% SW Region €	73.7%	81.1%	-12%

*County Health Profiles ⁷, € MT BRFS ¹¹

Diabetes

	Local	National	2020 Goal	Difference between Local and 2020 goal
Reduce death rate from diabetes per 100,000 population	17.4	73.1	65.8	-48.4

County Health Profiles ⁷

Family Planning

	Local	National	2020 Goal	Difference between Local and 2020 goal
Reduce Pregnancy Rates Females 15-17	2.79% *	40.2%	36.2%	-33.41%
Adolescents 15-17 who have not had sex	44% €	72.1% F	79.3% F	-35.3% F
		71.2% M	78.3% M	-34.3% M
Increase amount of Sexually Active Teens 15-19 who use condoms last intercourse	34.3%€	52.8 % F	58.1 %F	-23.8%
		77.9 % M	85.7 % M	-51.4%

* Teen Pregnancy Rates 07-08 ³¹, € Youth Risk Behavior Survey ²³

Education

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Percent of Population having achieved a high school diploma	90% *	89.9%	97.9%	-7.9%

* County Health Profiles ⁷

Heart Disease and Stroke

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Coronary Heart Disease	124*	126	100.8	-23.2
Stroke Deaths	17.4*	42.2	33.8	16.4
Adults with Hypertension Whose Blood Pressure is Under Control	Unknown	43.7%	61.2%	
Adults who have had their blood cholesterol check in the last 5 years	72% SW Region €	74.6	82.1%	-10.1%

*County Health Profiles ⁷, € MT BRFSS ¹¹

Immunizations

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Children aged 19 to 35 months who receive the recommended doses of DTaP, polio, MMR, HiB, hepatitis B, varicella and PCV vaccines	56.0% MT	68%	80%	24%

Immunization survey ¹⁸

Injury and Violence Prevention

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Fatal Injuries per 100,000	61*	52.9	53.3	-7.7
Motor Vehicle Crash-related deaths	69.7 *	13.8	12.4	-57.3
Use of Safety Belts	86% €	84%	92.4%	-6.4%
Reduce number of Physical Assaults (per 1,000 population)	1.2 £	16.3	14.7	-13.5

Students in grades 9 through 12 reporting they had participated in a physical fight in the last 12 months.	13.8% ¥	31.5%	28.4%	-14.6%
Students in grades 9 through 12 reported that they were bullied on school property in the previous 12 months in 2009	24.2% ¥	19.9%	17.9%	-6%
Students in grades 9 through 12 reported that they carried weapons on school property during the past 30 days in 2009	19.1% ¥	5.6%	4.6%	-15%

* Accidental Deaths MT Vital Statistics ¹⁴, € Jefferson County Health Needs Assessment ¹², € Aggravated Assaults Montana Board of Crime Control ²⁵, ¥ YRBS ²³

Maternal, Infant, and Child Health

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Neonatal deaths (within the first 28 days of life)(per 1,000 live births)	8.7 *	4.5	4.1	4.6
Prenatal care beginning in first trimester	86% €	70.8%	77.9%	8.1%
Females delivering a live birth reported abstaining from cigarette smoking during pregnancy	85.10% *	89.6%	98.6%	-14%

* MT Vital Statistics ¹⁴, € County Health Profiles ⁷

Mental Health

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Suicides (per 100,000) occurred in 2007	34.9 *	11.3	10.2	24.7

* MT Vital Statistics ¹⁴

Oral Health

	Local	National	2020 Goal	Difference between Local and 2020 Goal
People 2 years or older had a dental visit in the past year	67.3%*	40.2%	49%	18.3%

*Adults who have gone to the dentist in the last year MT BRFSS ¹¹

Physical Exercise

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Reduce number of adults who report no leisure time activity	18.3%*	36.2%	32.6%	-14.3%

*Adults reporting no exercise in last 30 days MT BRFSS ¹¹

Sexually Transmitted Diseases

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Cases of gonorrhea (per 100,000) aged 15 to 44 years	11.3* Females	285	257	245.7
	5.7* Males	220	198	192.3

*NCHHSTP ³²

Substance Abuse

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Adolescents aged 12 to 17 years who	28.0% *	85.8%	94.4%	-66%

had never used alcohol in their lives				
Adolescents aged 12 to 17 years who had never used marijuana in their lives	74.2% *	94.4%	96.4%	22%
Adolescents reporting that they rode in a car driven by someone who had been drinking	24.8% ¥	28.8%	25.5%	0.7%
Cirrhosis deaths (per 100,000 population)	52.3 €	9.1	8.2	-44.1
Adults aged 18 years and older reported that they engaged in binge drinking during the past 30 days	15.5% SW Region ¥	27.0%	24.3%	-8.8
Adults aged 18 years and older were current cigarette smokers	16.6% ¥	20.6%	12.0%	4.6
Adults aged 18 years and older were current users of snuff or chewing tobacco products	5.6% ¥	2.3%	0.3%	-5%
Adolescents in grades 9 through 12 used cigarettes, chewing tobacco, snuff, or cigars in the past 30 days	19.5% Cigarettes *	26.0%	21.0%	-2.5% Cigarettes
	18.9% Chewing Tobacco *			-3.1% Chew

*YRBS ₂₃, € MT Vital Statistics ₁₄, ¥ MT BRFFS ₁₁

Weight Status

	Local	National	2020 Goal	Difference between Local and 2020 Goal
Adults who are obese	22.7% SW Region*	34.0%	30.6%	-8%
Adults at a healthy weight	42.7% SW Region*	30.8%	33.9%	8.8%

*MT BRFFS ₁₁

Community Themes and Strengths Assessment

2012

This assessment is designed to fill in any gaps in information by answering what is important to our community, how quality of life is perceived, and what assets we have.

Jefferson County Survey Results

As part of a Community Health Assessment done for the Jefferson County Health Department, the MAPP (Mobilizing for Action through Planning and Partnerships) coordinators conducted a county wide survey for households in Jefferson County. 4,670 envelopes were sent out, and 584 were returned back, for a return rate of 12.5%. Each resident home and post office box was sent one survey, and respondents were asked to fill out one per household by the adult resident with the next birthday.

Communities Defined in this Assessment

Jefferson County has several distinct communities across the 1,656.7 square miles of land area and 2.2 square miles of inland water area. In an open ended question, residents were asked to self-identify the community they live in. Any self-identified community that had less than 20 residents was integrated into one of the 6 major communities, unless it was unclear which community they could be a part of. 91% of responses fell within 6 communities: Basin, Boulder, Clancy, Jefferson City, Montana City, and Whitehall.

Sampling Methodology

To accurately represent the population studied and to minimize bias, each resident mailing address and post office box in the county received one survey to be filled out by the adult with the next birthday. To control for non-response bias it is a common and preferred practice to apply a post-stratification survey weight to the raw data. Weighted graphs make raw data more accurate by comparing surveys to actual county demographics. The graphs and tables in this report were weighted based on age and gender, so that the sample will more closely match the population for these characteristics. The demographic groupings used in this report were ages 18-39 male, ages 18-39 female, ages 40-60 male, ages 40-60 female, ages greater than 60 male, and ages greater than 60 female. Certain sets of data on specific questions could not fit into these groupings and were presented as raw data. These questions are labeled in the report as such.

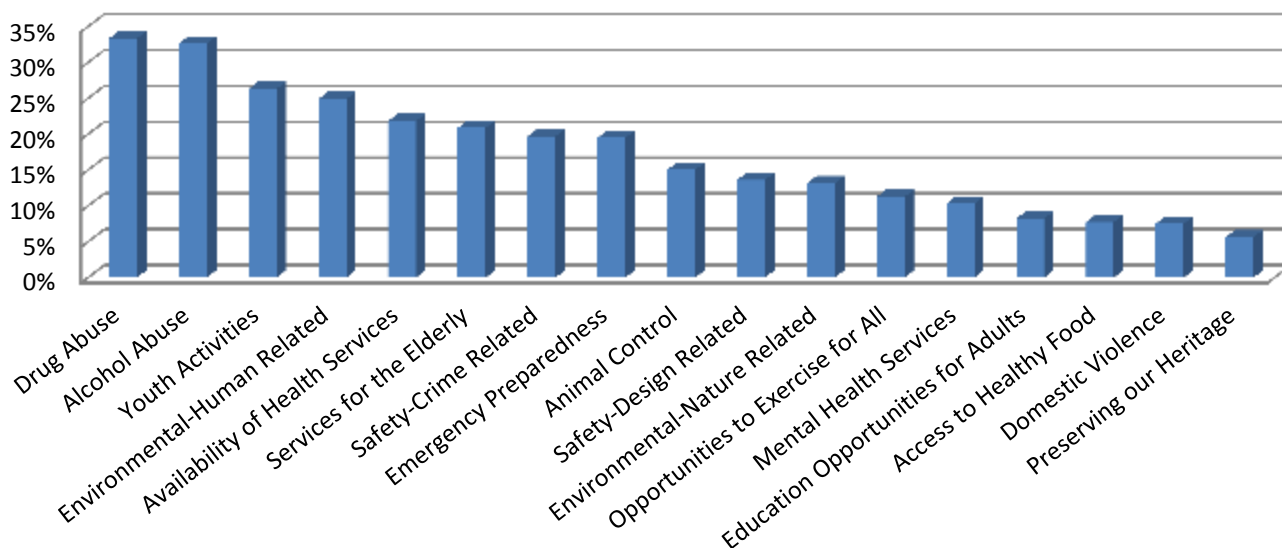
For a given demographic group, the number of respondents may have been slightly undersampled and given a weight of 1.1 while another grouping may have been slightly oversampled and given a weight of 0.9 respondents. Demographic groupings were based on US Census data and chosen based on sample accuracy and number of respondents. The sample consisted only of county residents age 18 and over. Data collected on children were given by the parent answering the survey.

County Concerns:

Table 1: Do you think the following are concerns in the COUNTY?					
	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Alcohol Abuse	36%	37%	23%	3%	1%
Drug Abuse	35%	40%	20%	3%	1%
Access to Healthy Food	24%	33%	28%	13%	3%
Safety-Crime Related	16%	40%	32%	11%	1%
Safety-Design Related (includes adding stop signs, speed limits, crosswalks, or safe walking paths)	21%	38%	27%	12%	2%
Emergency Preparedness	25%	38%	29%	8%	1%
Services for the Elderly	24%	40%	31%	5%	1%
Mental Health Services	18%	36%	36%	9%	2%
Environmental-Human Related (includes water quality, industrial wastes, recycling etc.)	31%	37%	20%	10%	2%
Environmental-Nature Related (including preserving rivers, game, forests etc.)	24%	36%	28%	9%	3%
Education Opportunities for Adults	19%	34%	36%	9%	2%
Youth Activities	29%	42%	22%	5%	1%
Animal Control	27%	31%	32%	8%	1%
Opportunities to Exercise for All	24%	33%	27%	12%	4%
Domestic Violence	22%	35%	38%	4%	1%
Availability of Health Services	27%	37%	26%	9%	2%
Preserving our Heritage	15%	32%	44%	8%	2%

Highlighted rows have the most residents Strongly Agreeing, or Agreeing that the topic is of Concern (Table 1).

Figure 1: Percent of Residents Who Rated the Following as One of Their Top 3 Concerns*

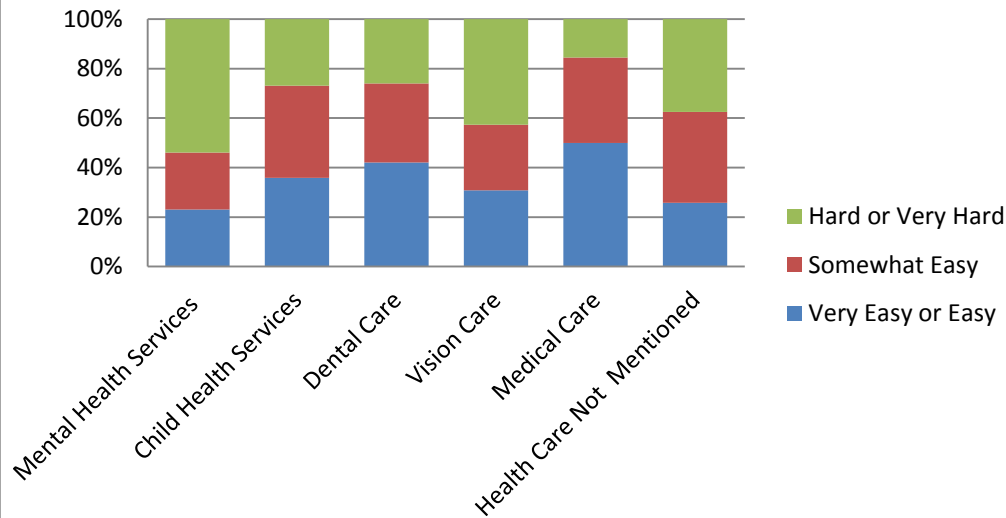


The top concerns in communities are alcohol abuse, drug abuse, and youth activities (Fig. 1)

* Due to a computer error, environmental-nature related was left off of the online version of the survey. About 1/4 of the surveys were entered online by respondents, and the other surveys were submitted as a paper copy. Of the paper copies, 56 respondents listed environmental-nature as one of their top 3 concerns. Data is unweighted.

County Services:

Figure 2: How easy it is for people in your community to get services?



The most difficult services to get in Jefferson County communities are mental health services and vision care, while the easiest are medical care and dental care (Fig.2).

Emergency medical services, fire protection, and law enforcement are rated the highest in quality.

Walking paths, roads/bridges, and mental health services are rated the worst in quality. (Fig. 3)

Figure 3: Rating of Local Community Infrastructure and Services

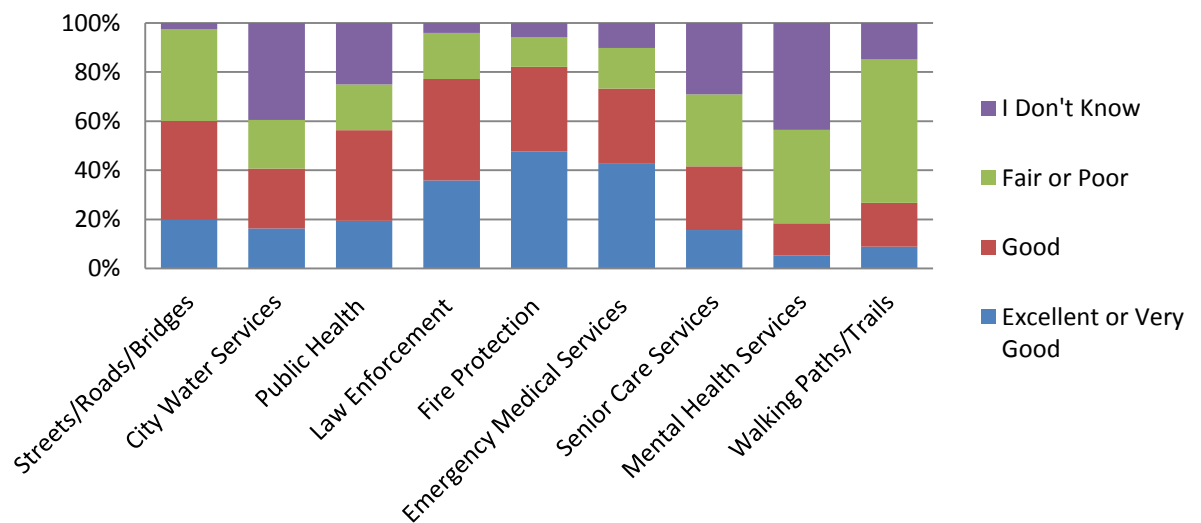


Table 2: Was there a time in the last 12 months when any of the following occurred?

	Yes	No	I don't know	N/A
You had difficulty getting a doctor's appointment, or appointment with a clinic	16.7%	69.1%	1.1%	13.1%
You needed to see a doctor or nurse, but could not because of the cost	16.6%	69.9%	1.9%	11.6%
You lacked transportation, making it difficult/prevented you from getting care	3.7%	82.2%	0.9%	13.2%
You needed to purchase a medication, but could not because of the cost	12.5%	74.8%	0.7%	12.0%
You needed to see a doctor or nurse, but could not because the office hours were not convenient	13.1%	70.8%	2.0%	14.0%

A large majority of residents did not have difficulty getting to appointments, seeing a doctor or nurse, or purchasing medication (Table 2).

Water Testing:

Figure 4: Have you tested your water for harmful chemicals in the last 5 years?

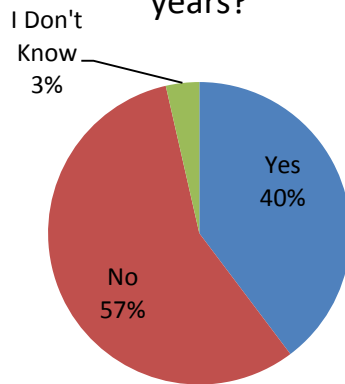
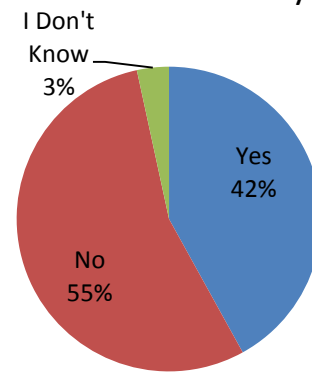
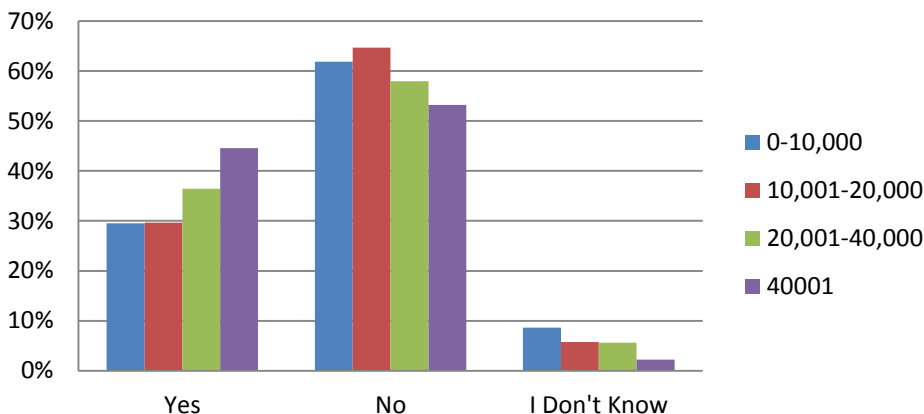


Figure 5: Homes with children that have tested their water for harmful chemicals in the last 5 years?



A majority of residents have not tested their water for harmful chemicals in five years (Fig. 4). There is little difference when compared to homes that reported having children in the home (Fig. 5).

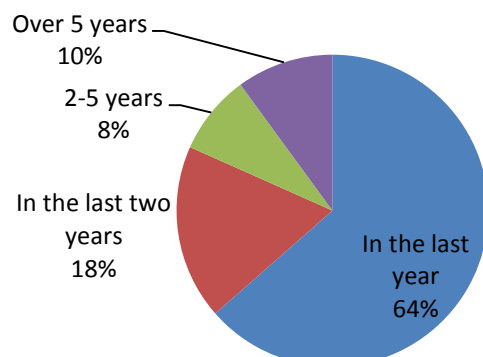
Figure 6: Water Testing Separated by Income



While those of lower income were slightly more likely to not have had their water tested, this is not significant. Fewer people have had their water tested (Fig. 6).

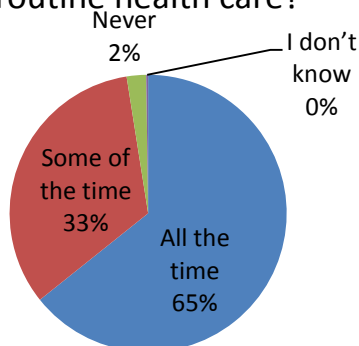
Public Health Services:

Figure 7: When was your last physical checkup?



82% of residents have had a physical checkup in the last two years, and 64% in the last year. For 10% of residents, it has been more than 5 years since their last physical checkup (Fig. 7).

Figure 8: Does your family regularly go outside Jefferson County for routine health care?



65% of residents regularly go outside of the county for routine health care (Fig. 8). 73% residents have not used the community health clinics in Helena or Butte, of those 13% have never heard of these clinics (Fig. 9).

Figure 9: Residents that have used the Community Health Clinic in Helena or Butte within the last 2 years?

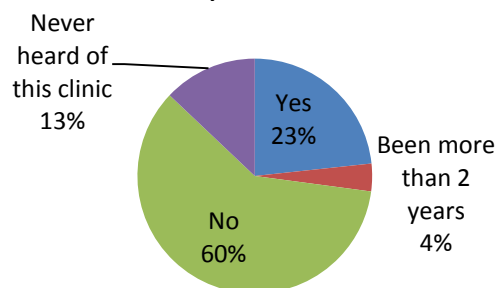


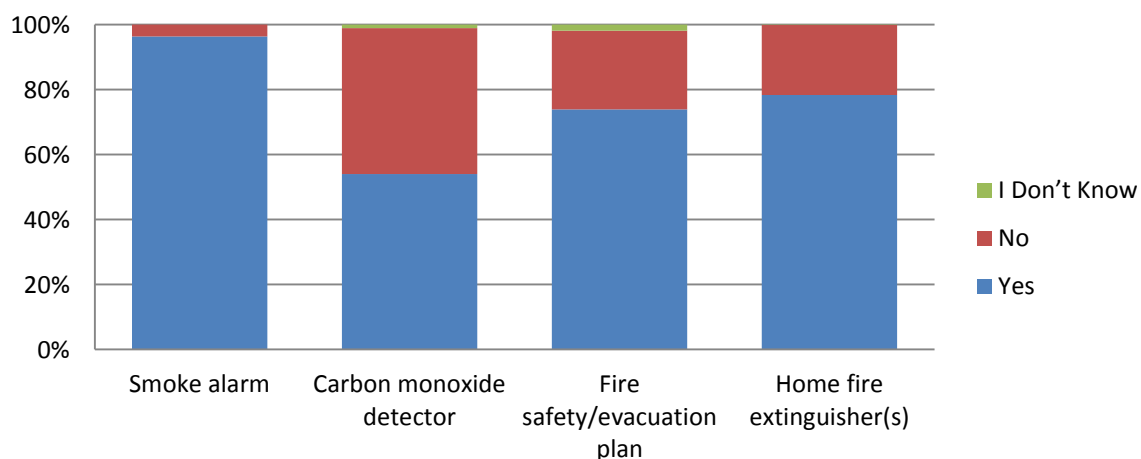
Table 3: Are you aware of what services the Jefferson County Public Health Department provides?

Answer Options	Response Percent
Yes	11%
I know of some services, but not sure if that's all	44%
No	44%

Only 11% of residents were aware of all services in the county health department compared to 44% that are not aware at all (Table 3).

Emergency Preparedness:

Figure 10: Does your household have...



Most residents are prepared emergency situations such as fires, but about half are unprepared in case of a carbon monoxide leak (Fig.10).

Community and Family:

Figure 11: How Many Hours a Month Do You Volunteer Your Time for Community Service?

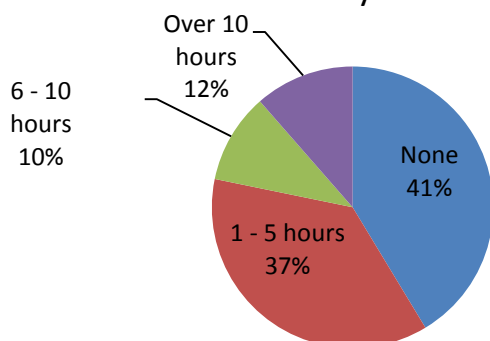
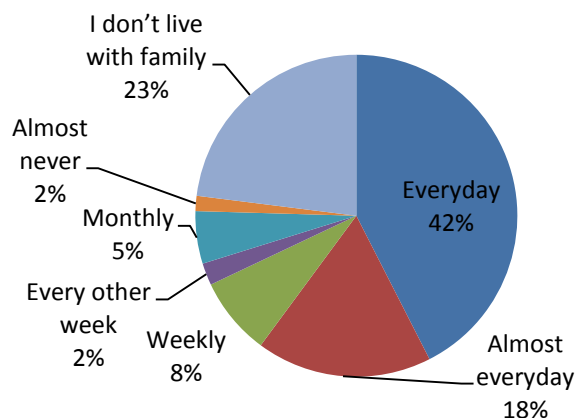


Figure 12: How often does your family spend quality time together?



Most residents volunteer their time for community service (Fig. 11) and spend quality time with their family often (Fig. 12). Families with children tend to spend even more quality time together (Fig. 13).

Figure 13: How often do family's with children spend quality time together?

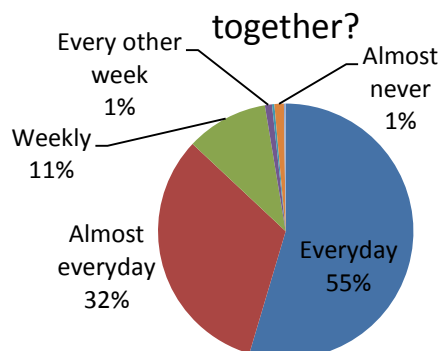
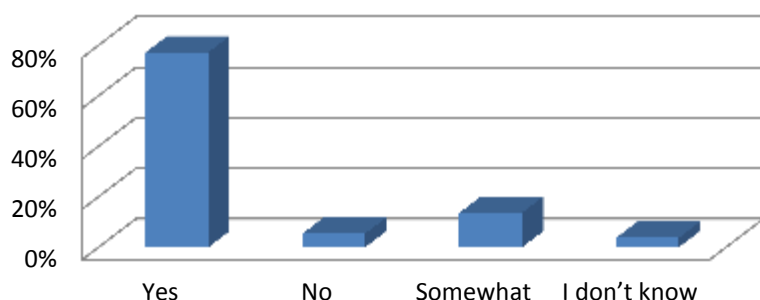
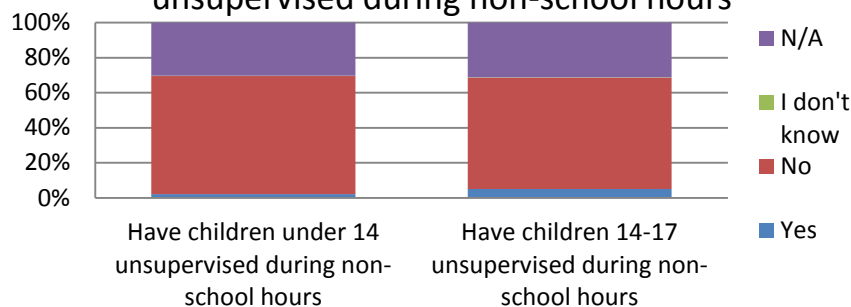


Figure 14: I am proud to raise/or have raised my family in the COUNTY.



Excluding resident that are not raising a family, about 77% are proud to raise or have raised a family here (Fig. 14)

Figure 15: Does your household have children unsupervised during non-school hours



Most residents do not have children unsupervised during non-school hours (Fig. 15).

Access to Education and Exercise:

Figure 16: Would you be interested in taking a class on...?*

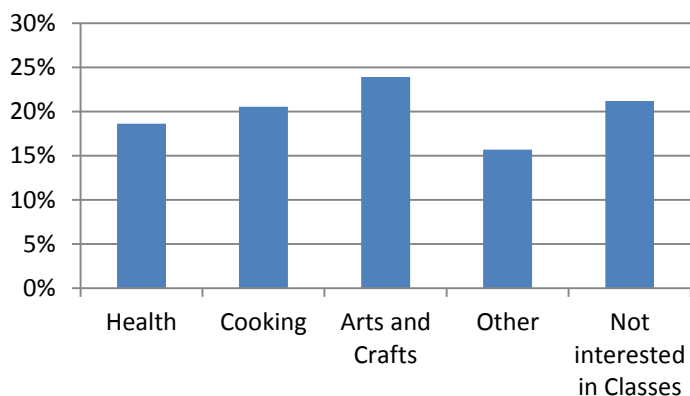
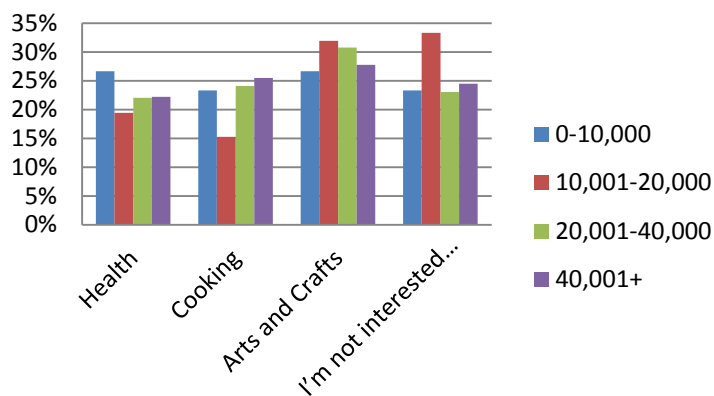


Figure 17: Would you be interested in taking a class?*



About 4 out of 5 residents would like to attend local classes, of which most would like to take arts and crafts classes (Fig. 16). There is no clear trend between interest in classes and income (Fig. 17).

*Data is unweighted

Figure 18: There are plenty of activities in which I can get exercise in my COMMUNITY

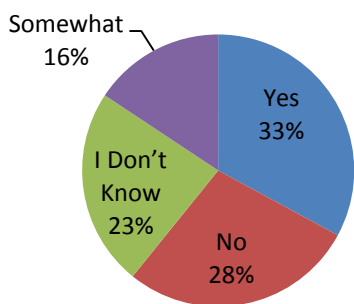
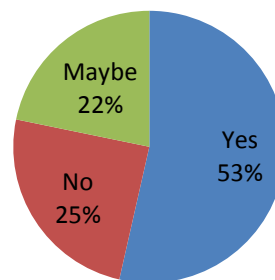
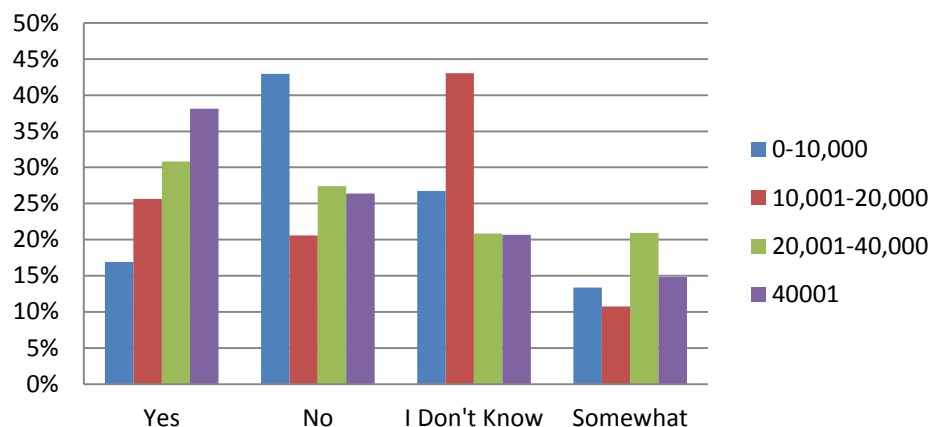


Figure 19: Would you exercise more if there were safer, or more numerous walking paths?



About 1 in 3 residents believe that are plenty of activities to get exercise. About a quarter of residents do not, another quarter don't know (Fig. 18). Over half of residents would exercise more if walking paths were improved or added to (Fig. 19).

Figure 20: I can get exercise in my COMMUNITY.



People of lower incomes are more likely to be unsure if they can get exercise in their community, or think that they can't get exercise in their community (Fig. 20).

Regardless of income, residents state at similar levels that they would or would not exercise more if there were better, or more numerous walking paths and trails in their community (Fig. 21).

Figure 21: Would you exercise more if there were safer, or more numerous walking paths or trails in your community?

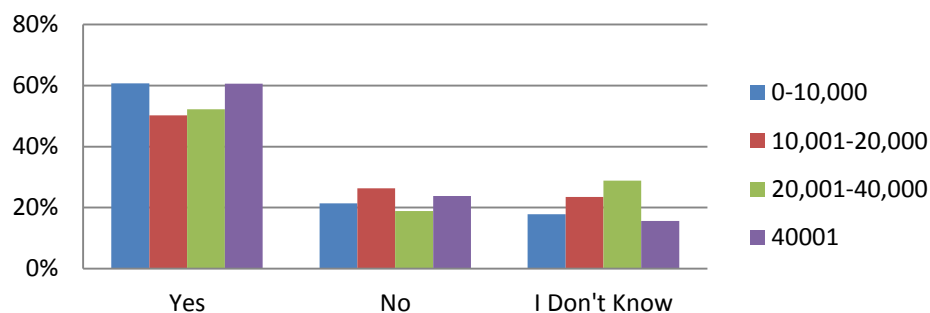
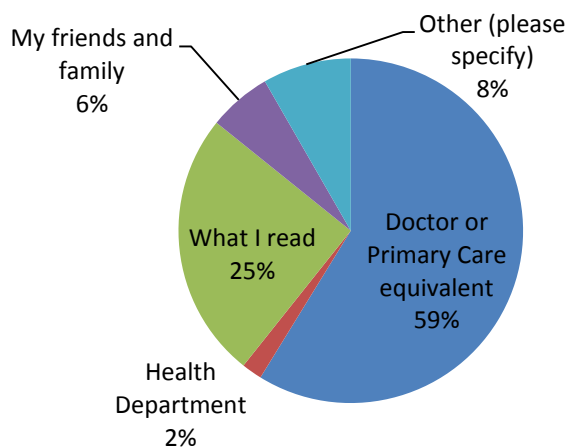


Figure 22: Where do you get most of your health related information*



About 3 out of 5 residents get most of their health related information from their doctor or primary care equivalent (Fig. 22).

*The question specified respondents to choose only one answer, however on paper copies (about 75% of the surveys collected) about 81 respondents answered more than one answer. Data is unweighted.

Safety:

Figure 23: If you own a gun in the home are their child proof locks on the guns?

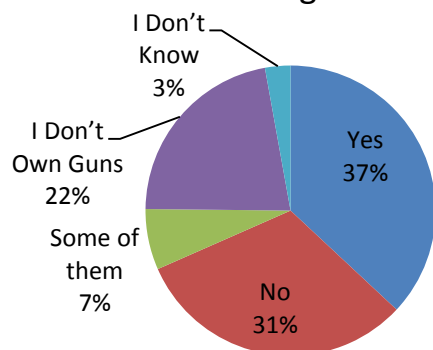
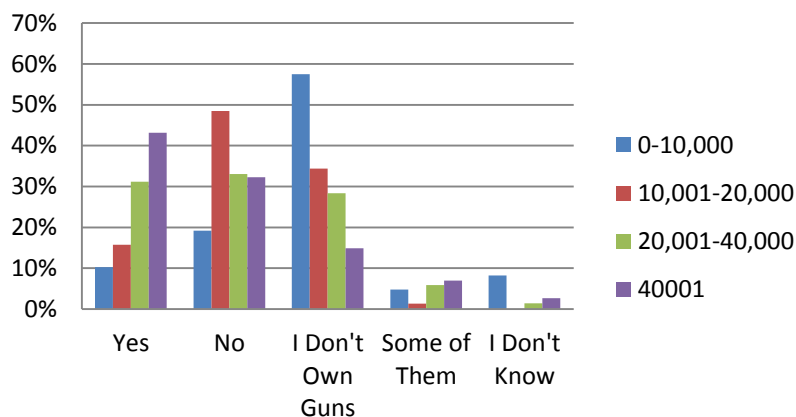


Figure 24: If you own a gun in the home are there child proof locks on the guns?



37% of residents have child proof locks on their guns, while 31% do not. About a quarter of residents do not have guns (Fig. 23). Residents of lower income are more likely to not own guns or have locks on their guns (Fig. 24).

Figure 25: I wear a helmet when riding a bicycle, etc.

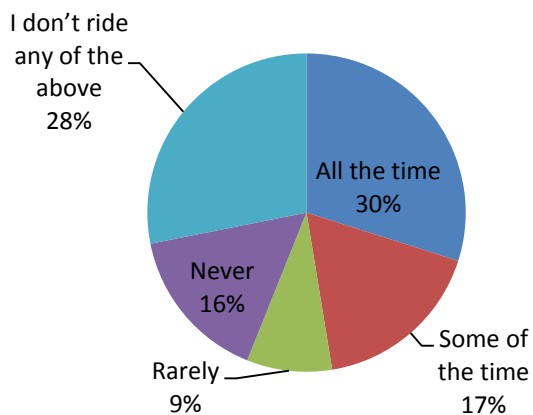


Figure 26: My kids wear a helmet when riding a bike, etc.

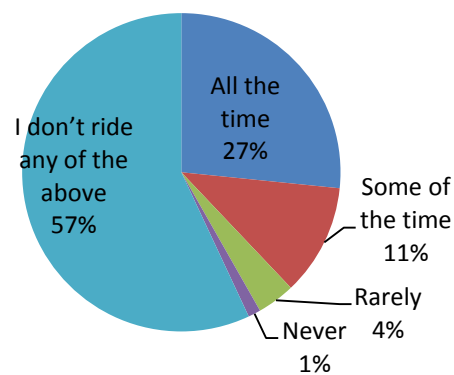
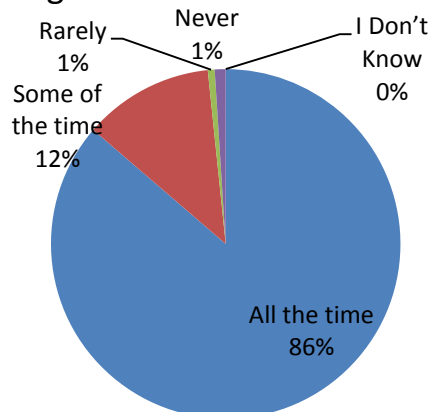


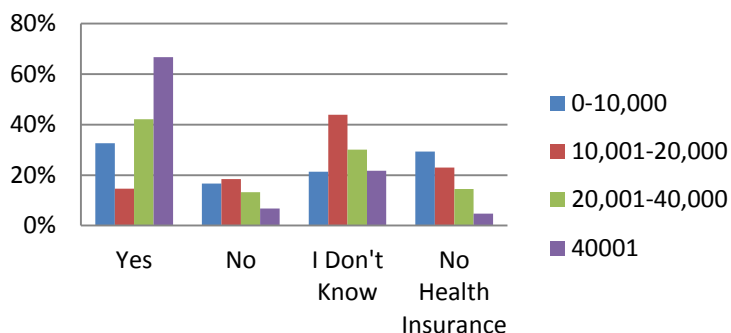
Figure 27: I wear a seatbelt



28% of resident and 57% children do not ride bikes, ATVs, or motorcycles (Fig. 25 & 26, respectively). While 30% of residents and 27% of kids always wear a helmet, about 86% always wear seatbelt (Fig. 27).

Mental Health:

Figure 28: Does your health insurance cover mental services?



About 11% of respondents did not have health insurance (Fig. 28). Of those that do, about 57% knew theirs covered mental health and about 11% knew theirs did not.

Almost 1 in 3 respondents with health insurance did not know if they were covered for mental health services (Table 4).

Table 4: If you have health insurance does it cover mental services?

Answer Options	Response Percentage
Yes	57%
No	11%
I don't know	31%

Figure 29: Quality of Life *

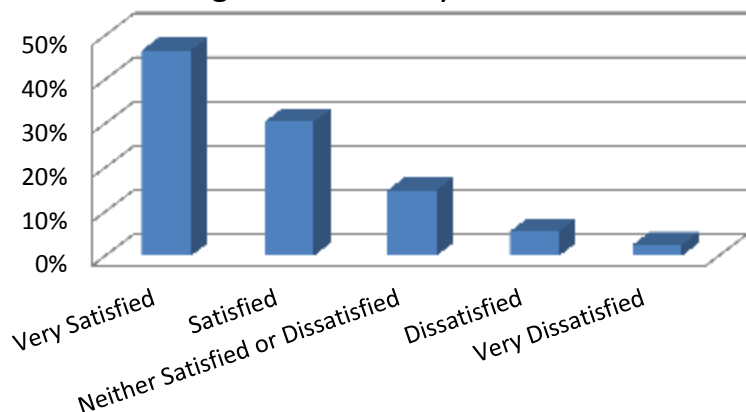
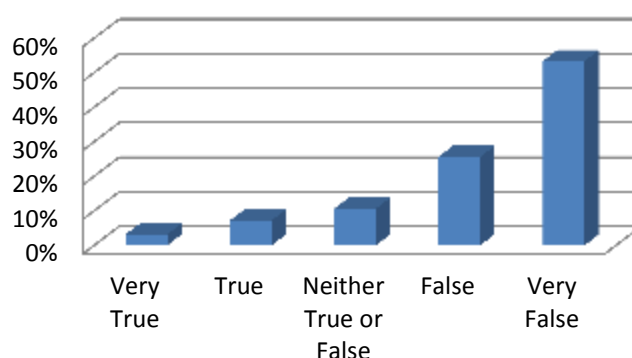


Figure 30: I often feel lonely or sad.



About 3 in 4 people are either very satisfied or satisfied with their quality of life and don't often feel lonely or sad. The overall residents are satisfied with their quality of life and do not often feel lonely or sad (Fig. 29 & 30 respectively).

*Due to a typo in the survey half of the paper surveys were sent out with a very satisfied-very satisfied score. Some respondents corrected this, while others did not notice the mistake. We left out any ambiguous answers, but due to this we cannot guarantee the accuracy of this data.

Figure 31: Quality of Life*

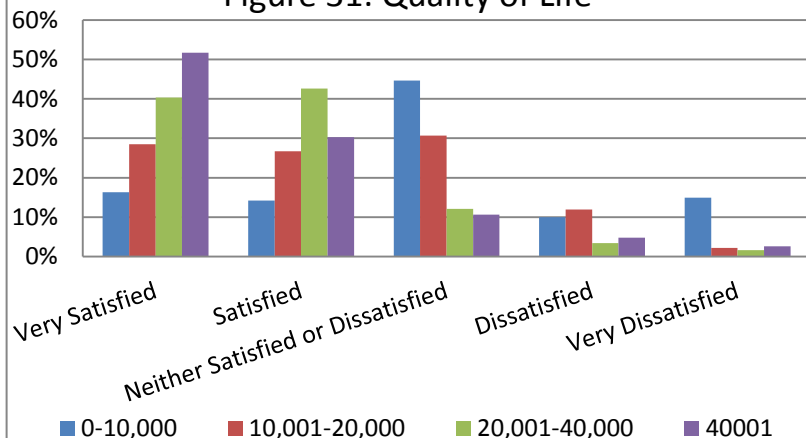
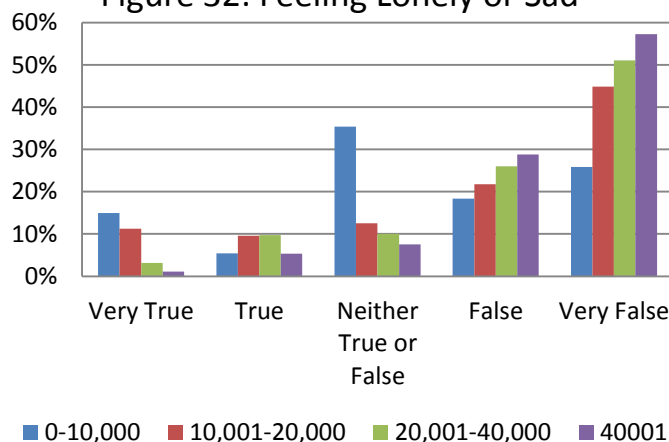


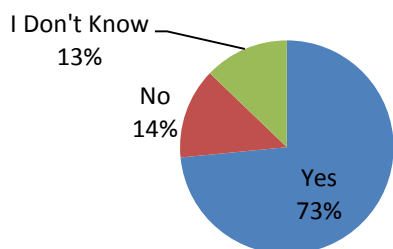
Figure 32: Feeling Lonely or Sad



Income levels do seem to play a factor in the quality of life and feeling lonely or sad (Fig. 31 & 32 respectively). People of lower incomes make up a greater percentage of those who rate their quality of life between neither satisfied nor dissatisfied and very dissatisfied. They also make up a greater percentage of those who often feel sad or lonely.

Community Support:

Figure 33: If I was having a rough time there are people I could reach out to for help



73% of residents have people that could help if there were any financial, physical, or emotional trouble (Figure 33).

Figure 34: I feel like my COMMUNITY cares about me.

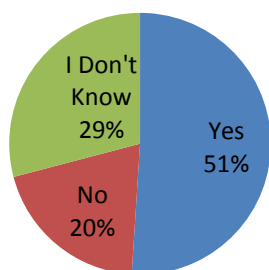
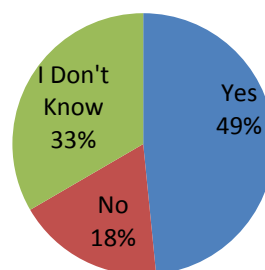


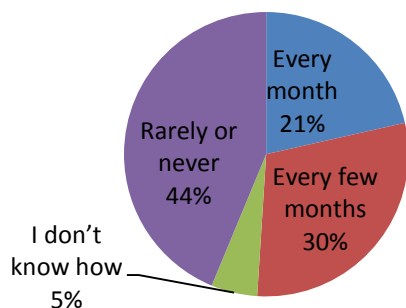
Figure 35: I feel like others in the COUNTY care about me



While about half of residents feel their county and community care about them, around 20% of residents do not. More residents are uncertain if the county cares about them compared to the community, about 38% and 32%, respectively (Fig. 34 & 35).

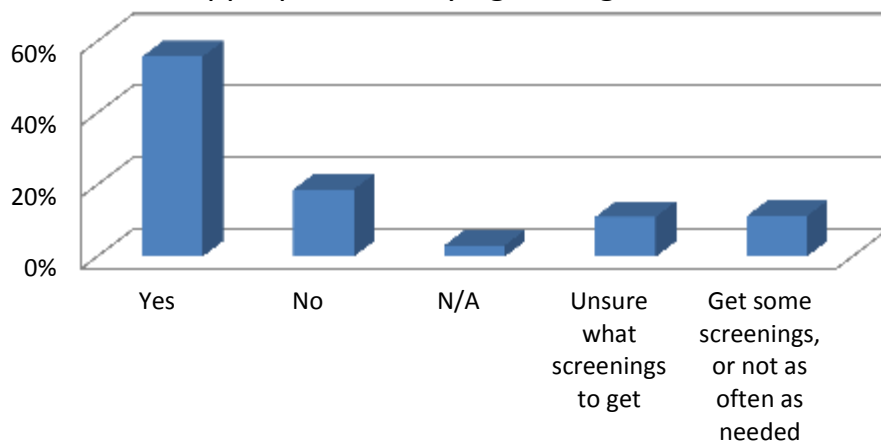
Cancer Screening:

Figure 36: I perform self-exams for cancer (breast or testicle self-exam)



44% of residents do not perform self-exams for cancer, and 30% only check every few months (Fig.36).

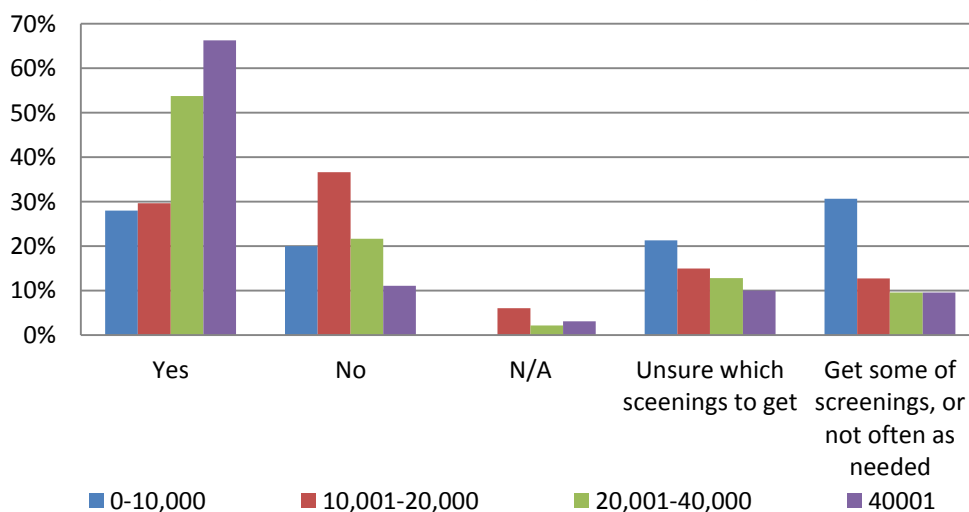
Figure 37: I get regular screenings for cancer appropriate to my age and gender



Around 56% of residents get regular cancer screenings, 11% don't get all of the appropriate screenings, and another 11% don't know which screenings they should get (Fig. 37).

Those of lower incomes are more likely to not get screenings, not get them as often as recommended, or be unsure as to what cancer screenings they should be getting (Fig. 38).

Figure 38: Cancer Screenings Broken up by Income



Basin

Basin is a small community of around 212 (2010 census) ₃ with a median age of 43.7, located on interstate 15 halfway between Butte and Helena. The poverty rate for Basin is 22.6%. Basin has its own water district, elementary school, and fire department, and has several old mines in the area. Some of these mines have been turned into radon health mines. In the past there have been health concerns about toxic sites of mine runoff known as “superfunds”, but these areas have been cleaned to the effect of having low human exposure. Also present in Basin is a school house for K-6th grade.

Assets

Local Citizen Groups

Basin Fire Department

School Board

Water Board

Institutions

Basin School

Leaning Tower of Pizza

The Silver Saddle

Community Hall

Merry Widow Health Mine

Physical Assets

School Playground

Events

Possible Projects

Interviews

Several Basin residents from all different walks of life were interviewed between December 2011 and February 2012 to gain perspective on what health needs and issues affect them. To reduce interviewer bias, respondents were quoted as much as possible with any paraphrasing repeated back to eliminate misunderstandings.

In general how would you rate the overall health and living conditions in your community? Is the community where you live feel connected?

Interview 1: In my impression just for going to towns nearby, similar to Butte. A lot of people need access to healthcare and don't have the access. They don't have the money. Let health issues accumulate because they can't pay for it. They need help from neighbors and family for health.

Interview 2: Personally is great, she goes to Bozeman for health for small emergencies she would go to Boulder In general, she doesn't think transportation is adequate countywide

Compared to a few years ago, do you think health and living conditions in your community has improved, stayed the same, or declined? Why?

Interview 1: Stayed the same. In terms of economy and post office. The economy is the biggest thing. Quite a few people are out of work, or work less. Having post office closed will be detrimental. Lots of elderly people get their medicines and that is the only way to get it.

Infrastructure stayed about the same.

Interview 2: The Boulder medical clinic was an improvement, could have better access to dental care

What factors have affected this change in your community?

Interview 2: Alcohol and drug abuse, low income families, how far we are from big cities, distance to travel, stress of losing post office, fire department, mental health services

Are there people or groups of people in Basin whose health or quality of life may not be as good as others? Why?

Interview 1: Elderly. Live in basin because they can get by here both because you can live on less than in a town or city and neighbors will help out to a certain extend.

Interview 2: Yes, looking at the young people. Also people receiving Welfare, in drug and alcohol abuse, low income, domestic abuse.

Why do you think their health/quality of life is not as good as others?

Interview 2: Lack of follow up when problem known, lack of income, knowledge/education needed in and outside the school, traditions.

In your opinion, what are the most critical issues in your community?

Interview 1: Keep post office open. Same access to medicine as they do now. We get by as a small town. Being able to move around is important. Medical assistance is at a distance, but accessible with great volunteers.

Interview 2: Access to health care, family treatment of substance abuse.

What needs to be done to address these issues?

Interview 2: Better follow up, in town help for drug abuse – AA groups in smaller towns

What barriers exist to improving health and making changes?

Interview 1: Education-my first thought. Quite a few people don't have terrible healthy lifestyles. People who have impairments tend to be less healthy than those who.

Interview 2: Lack of money to help pay for someone to transport, host meetings

Survey Results-Basin

Table 1: What do you think the following are concerns in the COUNTY?					
What do you think the following are concerns in the COUNTY?					
Answer Options	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Alcohol Abuse	27%	34%	31%	6%	2%
Drug Abuse	17%	53%	22%	6%	2%
Access to Healthy Food	17%	34%	34%	11%	3%
Safety-Crime Related	15%	52%	26%	8%	0%
Safety-Design Related (includes adding stop signs, speed limits, crosswalks, or safe walking paths)	16%	44%	32%	8%	0%
Emergency Preparedness	28%	40%	25%	8%	0%
Services for the Elderly	17%	47%	30%	6%	0%
Mental Health Services	17%	28%	47%	5%	3%
Environmental-Human Related (includes water quality, industrial wastes, recycling etc.)	38%	34%	14%	12%	2%
Environmental-Nature Related (including preserving rivers, game, forests etc.)	26%	42%	20%	11%	2%
Education Opportunities for Adults	10%	30%	44%	16%	0%
Youth Activities	17%	48%	30%	5%	0%
Animal Control	20%	32%	37%	11%	0%
Opportunities to Exercise for All	21%	31%	29%	15%	5%
Domestic Violence	16%	35%	40%	8%	0%
Availability of Health Services	21%	35%	32%	13%	0%
Preserving our Heritage	8%	33%	47%	11%	2%

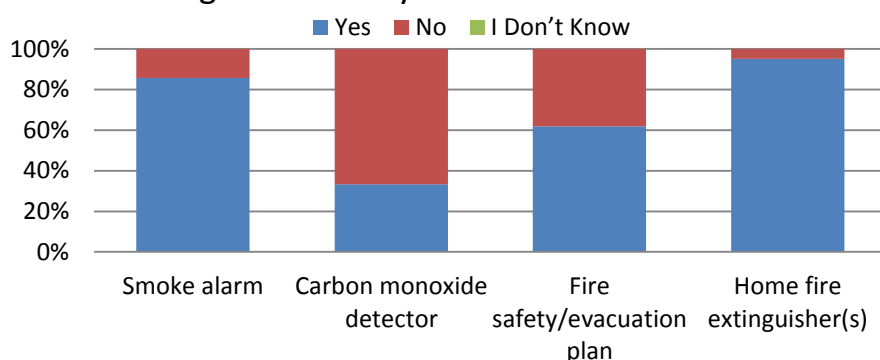
In Basin, animal control was also high on county concerns (57% agree or strongly agree) with youth activities being the most important county concern. (Table 1)

Figure 2: Rating of Local Community Infrastructure and Services



Mental health had the worst rating, with almost 3 in 4 people rating it as fair or poor. Basin residents also rated their fire protection much higher (Fig. 2).

Figure 3: Does your household have...



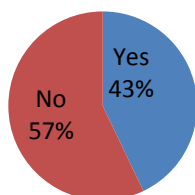
Fewer people in Basin are prepared in case of a carbon monoxide leak or have a fire safety plan compared to the county. (Fig. 3)

Table 2: Are you aware of what services the Jefferson County Public Health Department provides?

Answer Options	Response Percent
Yes	15%
I know of some services, but not sure if that's all	60%
No	25%

As well, more residents know of Jefferson County Public Health services compared to the county, 60% & 44%, respectively (Table 2).

Figure 4: Have you used the Community Health Clinic in Helena or Butte within the last 2 years?



More Basin residents have used of the Helena or Butte Health Clinics than the total county, 43% & 20%, respectively (Fig. 4). Basin residents would prefer health classes. (Fig, 5)

Figure 5: Interest in Classes

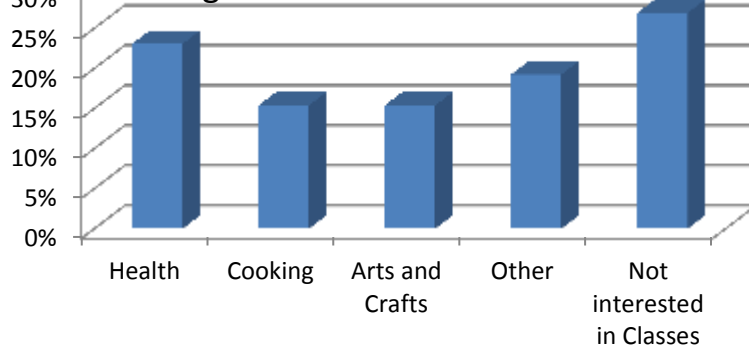
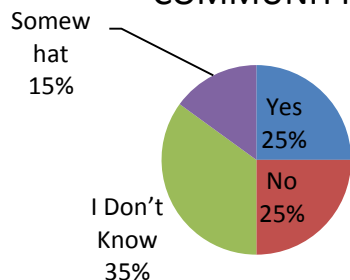


Figure 6: There are plenty of activities in which I can get exercise in my COMMUNITY.



Basin residents would support more activities that allow them to get exercise in their community, such as safer, more numerous walking paths (Fig. 6).

60% of Residents say that they would exercise more if there were more walking paths (Fig 7)

Figure 7: Would you exercise more if there were safer, or more numerous walking paths?

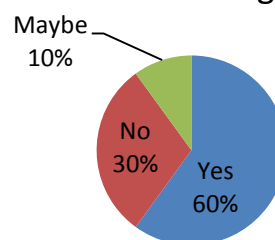
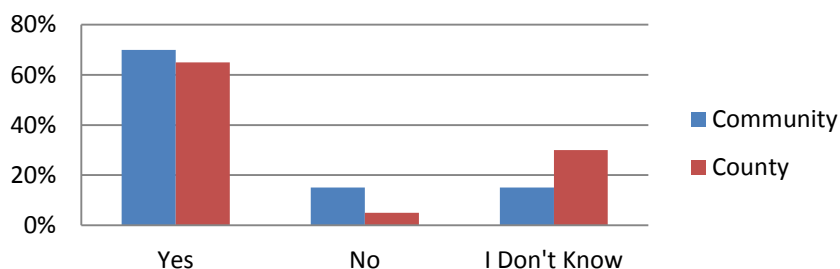


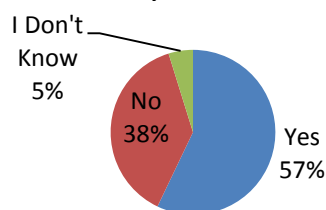
Figure 8: Does your community or county care for you?



More residents in basin feel that both others in their community, and in the county in general care about them than the average for the county (Fig. 8)

Slightly more people have tested their water in Basin than the averages for Jefferson County (Fig. 9)

Figure 9: Have you tested your water for harmful chemicals in the last 5 years?



Boulder

Boulder is an incorporated town situated at the intersection of I-15 and MT-69, about 30 miles south of Helena. The town has a population over 1,183 (2010 census) ₃ and is also home to the Jefferson County Seat. The median age of residents is 43.7. The poverty rate for boulder is 12.5%. Many of the counties services are centered in Boulder, including the Commissioner's office, Boulder Sheriff's Department, and Public Health Department, the Jefferson County Fair Grounds, and the High School for the northern half of the county. Also in boulder are several churches, a library, post office, a grocery store, an elementary school, a pool, and several parks.

Assets

County Government

County Commissioners
DES
Jefferson County Government

Jefferson County Health
Department
Sanitation

Sheriff's Department

Local Citizen Groups

21st Century Program

BART-COM
Boulder Ambulance
Boulder Area Chamber of
Commerce
Boulder Area Quilter's Guild
Boulder Assembly of God
Boulder City Council
BES Parent Teacher Group
Boulder Fitness Club

Boulder Police
Boulder United Methodist Church
Boulder Volunteer Fire
Department
CARE Coalition
Church of Jesus Christ of Latter
Day Saints
DUI Taskforce

Faith Lutheran Church
First Baptist Church of Boulder

Friends of Boulder Library
Growing Community, Naturally
Jefferson High School Board
JHS Boosters
JeffCo Food Share
Mariah's Challenge

Parks and Rec
Seventh-Day Adventist Church
St. Catherine's Catholic Church

Businesses/Institutions

AYA
Boulder Elementary School
Boulder Hot Springs
Boulder Library
Boulder Monitor
Carmen's Corner

Free Enterprise Health Mine

Jefferson County Fairgrounds
Jefferson High School
L&P
MDC

Phil & Tim's Bowling
Post Office
Riverside Corrections
Windsor Bar and Saloon
Women's Elkhorn Meth Treatment
Center

Physical Assets

Boulder Parks
School Playgrounds

Skate Park
Veterans Park

Veterans Pool

Events

Boulder Music and Arts Festival
Christmas Bazaar
Christmas Community Dinner
Easter Dinner

Halloween Events
Health and Safety Fair
Homecoming
Hunger Walk

Jefferson County Fair
Thanksgiving Dinner
Scarecrow Festival

Potential Projects

County Wide Trails mapped and online, W/potential fishing spots

Support Healthy Food Group-Community Gardens, Ample harvest Jeffco food share

Community Center
Safe Routes to School Program-Stop Signs around the School

Interviews

Several Boulder residents from all different walks of life were interviewed between December 2011 and February 2012 to gain perspective on what health needs and issues affect them. To reduce interviewer bias, respondents were quoted as much as possible with any paraphrasing repeated back to eliminate misunderstandings.

In general how would you rate the overall health and living conditions in your community? Is the community where you live feel connected?

Interview 3: Good. People are fairly healthy. Living conditions average. But people on both ends of the spectrum. Boulder does not feel like a community except for a small group of us.

Interview 4: Love it here. Have been here for 39 years, for a rural community about average.

Compared to a few years ago, do you think health and living conditions in your community has improved, stayed the same, or declined? Why?

Interview 1: Improved a little bit-Boulder housing project is a huge improvement. Wish we had a senior living center for housing. I used to work as a cook for the senior center. Broke my heart watching people I had been friends with forced to move because they had gotten to the point where they could no longer live in their homes.

Boulder clinic has helped a lot. People w/out transportation can get help.

Believes more people are more health conscious these days.

Interview 2: Stayed the same. People don't want others meddling with their lives.

Interview 3: Improved/Stayed the same. Some people have taken more pride in Main street change. Created some good positive things. Few people are trying to do exercise stuff.

After main street project, people got excited and after a few months back to normal. 2/12 committees from horizons are still active. People get complacent.

Interview 4: Stayed the same. Don't think very much has changed in town, but Main Street looks nice.

What factors have affected this change in your community?

Interview 2: Lack of involvement from community and commitment for change.

Are there people or groups of people in Jefferson County whose health or quality of life may not be as good as others? Why?

Interview 1: Senior Citizens-limited by their ability to get around

Kids aren't outside as much these days. Stay inside doing tech things.

Interview 2: Younger parents or single parents have a hard time keeping up to date with the pulse of the community and get involved. Involvement helps people feel more connected to their community and healthier.

Interview 3: Forced into not being healthy. Lots of elementary school qualifies for free and reduced lunch. People in this income range tend to buy junk food because it's cheaper.

Interview 4: Yes. Those in poverty. There is a lot of domestic abuse, a lot of inattention to children. People working 2 jobs or long hours leads to that. Not out of line with similar communities.

In your opinion, what are the most critical issues in your community?

Interview 1: More stop signs around Boulder. Increase safety on roads in town. Sidewalks. Better than it was. People would be able to walk more with them and get kids outside.

Senior housing-most houses aren't equipped for seniors & handicapped. Water drainage problems.

Interview 2: Sidewalks. Issues that they are working on in committees.

Interview 3: Housing is an issue. Poverty level is an issue. How to bring people out of poverty. Bringing in businesses that pay good salaries. Most business here people just get by.

Interview 4: Poverty & problems it breeds.

What needs to be done to address these issues?

Interview 2: Get community more involved. There is a misconception that people don't want assistance here. They tried to set up a public assistance office in Boulder at one point, but they said there wasn't enough demand for it.

Interview 3: Have to get community/business people involved. Tried to get several things down here but people keep shutting it down. The key is to get the right business here, but won't be right for everyone.

Interview 4: Schools try very hard to fill in gaps. Churches try hard to do the same thing. Support for struggling or single parents.

What barriers exist to improving health and making changes?

Interview 1: Lack of Finances-both individually and government

Interview 2: Lack of involvement, commitment to make a change. Education level for adults. Insurance.

Interview 3: People's attitudes. Got to want to do it, many people don't because they feel defeated. Sometimes location prohibits certain things from happening.

Overall generally, the biggest problem with getting people involved and making change is the fact we have such a transient community. Most of the people who come here are not go getters and just scrape by and don't want to get involved.

Interview 4: Poverty, and Distance.

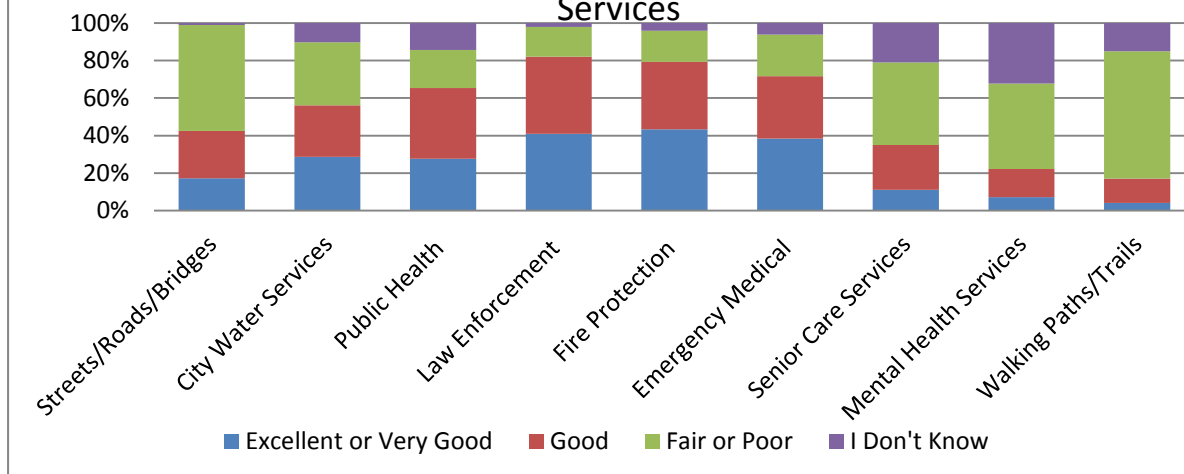
Survey Results-Boulder

Table 1: What do you think the following are concerns in the COUNTY?

Answer Options	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Alcohol Abuse	42%	38%	13%	6%	0%
Drug Abuse	43%	40%	14%	3%	0%
Access to Healthy Food	25%	35%	25%	9%	6%
Safety-Crime Related	20%	33%	38%	8%	1%
Safety-Design Related (includes adding stop signs, speed limits, crosswalks, or safe walking paths)	26%	36%	26%	9%	3%
Emergency Preparedness	27%	36%	28%	9%	0%
Services for the Elderly	39%	41%	16%	3%	0%
Mental Health Services	32%	38%	22%	7%	1%
Environmental-Human Related (includes water quality, industrial wastes, recycling etc.)	31%	38%	20%	7%	4%
Environmental-Nature Related (including preserving rivers, game, forests etc.)	26%	35%	29%	6%	4%
Education Opportunities for Adults	27%	39%	24%	7%	2%
Youth Activities	51%	30%	14%	3%	2%
Animal Control	36%	39%	17%	7%	1%
Opportunities to Exercise for All	35%	24%	28%	10%	3%
Domestic Violence	35%	43%	20%	2%	0%
Availability of Health Services	39%	35%	14%	11%	0%
Preserving our Heritage	22%	27%	37%	12%	2%

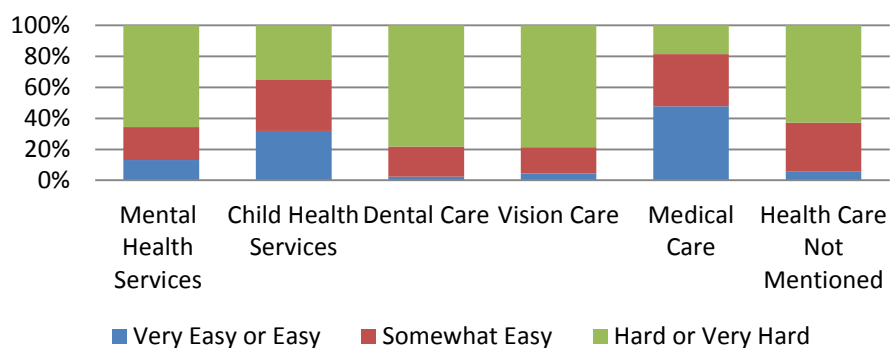
In Boulder, services for elderly were a higher concern than youth activities (Table 1)

Figure 1: Rating of Local Community Infrastructure and Services



Boulder residents' feel community infrastructure and services are similar to the countywide opinions. They favor law enforcement, fire, and emergency services, and rate walking paths and mental health services as fair or poor (Figure 1)

Figure 2: How easy it is for people in your community to get services?



Dental care and vision care are the hardest for Boulder residents to receive, while medical care and child health services are the easiest (Fig. 2).

Arts and crafts are the most wanted class to take in Boulder (Fig 3).

Figure 3: Would you be interested in taking a class?

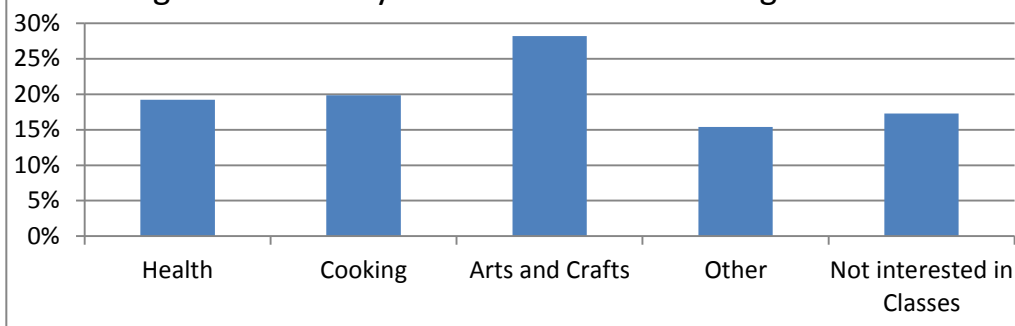
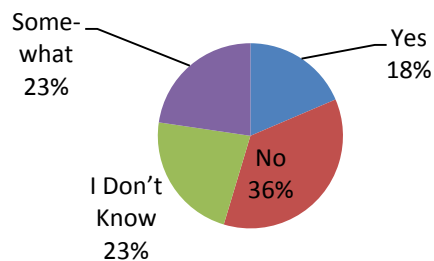


Figure 4: There are plenty of activities in which I can get exercise in my **COMMUNITY**.



Boulder residents do not feel there are plenty of activities to get exercise and over half would exercise more if there were more walking paths.

Figure 5: Would you exercise more if there were safer, or more numerous walking paths or trails in your community?

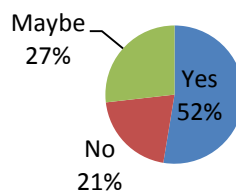


Figure 6: I feel like my **COMMUNITY** cares about me.

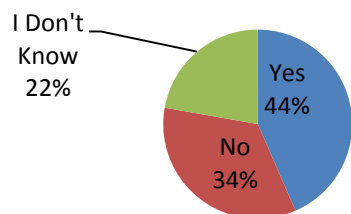
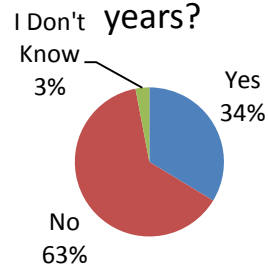


Figure 7: Have you tested your water for harmful chemicals in the last 5 years?



About 12% fewer Boulder residents feel the community cares about them compared to the overall county (Fig. 6). 34% of Boulder residents have tested their water compared to the 41% of residents countywide (Fig. 7).

Clancy

Clancy is located 12 months south of Helena on I-15. The area has 1,661 (2010) ₃ residents with a median age of 48.1. Clancy has its own elementary school, post office, and library. Also located in Clancy is the Jefferson County Museum. 4% of the population is considered at or below poverty. Residents in Jefferson City go to can either go to Boulder or Clancy for their services, while residents in Montana City tend to go to Helena for their needs.

Assets

Local Citizen Groups

Clancy Library	Clancy Volunteer Fire Department	United Methodist Church
Clancy PTO	Jefferson County Museum	

Businesses/Institutions

Clancy School	Stoneybrook Retirement Home
Chubby's	

Physical Assets

School Playground
Old Gym

Events

Clancy Days	Tour de Clancy
Fall Fest	

Potential Projects

Large sign in front of red school building w/ open close signs for businesses +message board.	Joint Teen Center/Senior Center at old Gym
Education classes at library	Water testing

Interviews

A Clancy resident was interviewed between December 2011 and February 2012 to gain perspective on what health needs and issues affect them. To reduce interviewer bias, respondents were quoted as much as possible with any paraphrasing repeated back to eliminate misunderstandings.

In general how would you rate the overall health and living conditions in your community? Is the community where you live feel connected?

Interview 1: I think it is determined a lot on incomes, and that being said I guess I feel like people I know that are currently still working in my age group (60's) I would say that it is good. I would say that 60% of the people overall have pretty good health. They can get healthcare when they need it. 40% struggling on medicare, or jobs without insurance. Challenges for people's health-ease that they can exercise. In some communities people are encouraged more to walk. **Compared to a few years ago, do you think health and living conditions in your community has improved, stayed the same, or declined? Why?**

Interview 1: I think when the county health department, when they came up to Clancy and opened their office up, that helped a lot. It was a great improvement. I always go there to get my flu shot. I think the nursing home that opened a rehab unit has been beneficial for people in the county. There was press a few years ago about water quality. People were concerned about their wells. Irradiated wells. Awareness on testing water is important.

Are there people or groups of people in (name of community) whose health or quality of life may not be as good as others? Why?

Interview 1: People low income and elderly. People without insurance. There is a group of people who have adequate income and are overworked who don't have time to adequately take care of themselves. Long commute to Helena is a contributing factor. People struggle with not becoming obese, and maintaining their physical health and mental health.

In your opinion, what are the most critical issues in your community?

I think providing a community that prioritizes health for everyone in a social way i.e. low cost gym.

What needs to be done to address these issues?

Interview 1: Not sure

What barriers exist to improving health and making changes?

Interview 1: Barrier of Time for many people. If they are working and commuting so much they don't have time to improve their physical health. Money would be a factor for people who might be able to use a health club.

Transportation could be a barrier to some people.

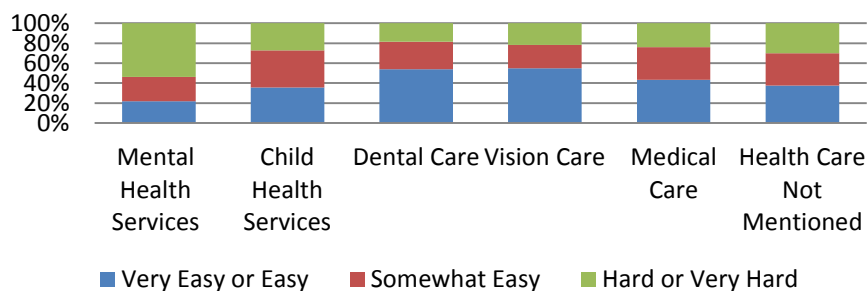
Survey Results-Clancy

Table 1: What do you think the following are concerns in the COUNTY?

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
Alcohol Abuse	30%	45%	21%	4%	0%
Drug Abuse	27%	53%	16%	5%	0%
Access to Healthy Food	9%	39%	36%	15%	2%
Safety-Crime Related	15%	45%	22%	18%	0%
Safety-Design Related (includes adding stop signs, speed limits, crosswalks, or safe walking paths)	20%	44%	24%	12%	1%
Emergency Preparedness	22%	48%	23%	6%	0%
Services for the Elderly	18%	51%	27%	3%	1%
Mental Health Services	15%	46%	33%	4%	2%
Environmental-Human Related (includes water quality, industrial wastes, recycling etc.)	33%	46%	12%	7%	2%
Environmental-Nature Related (including preserving rivers, game, forests etc.)	28%	40%	21%	8%	3%
Education Opportunities for Adults	11%	36%	44%	8%	1%
Youth Activities	23%	40%	32%	5%	0%
Animal Control	14%	34%	41%	10%	1%
Opportunities to Exercise for All	14%	33%	36%	14%	3%
Domestic Violence	18%	39%	41%	3%	0%
Availability of Health Services	18%	42%	32%	5%	3%
Preserving our Heritage	11%	38%	43%	6%	2%

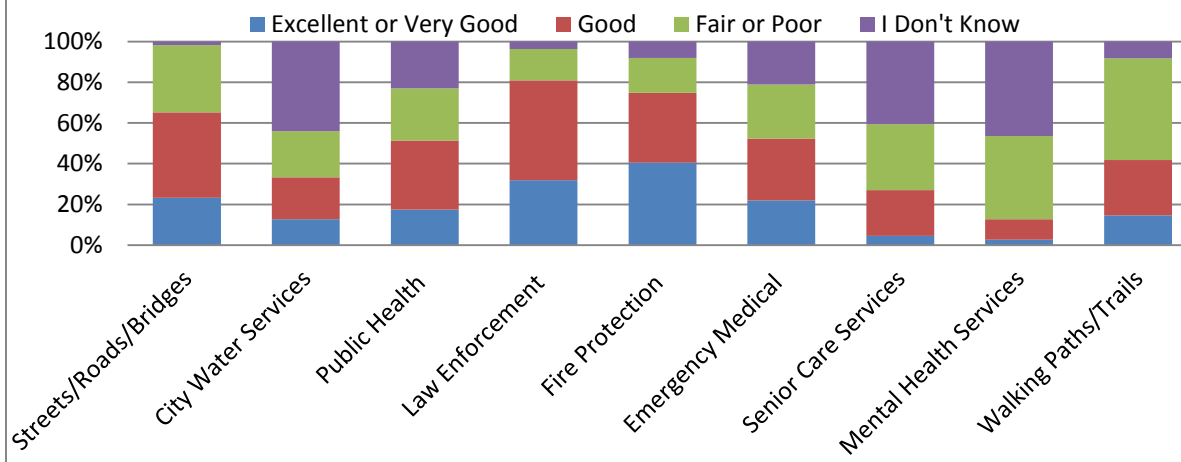
In Clancy, residents feel services for elderly are a higher concern than youth activities while the county finds youth activities more important (Table 1).

Figure 1: How easy it is for people in your community to get services?



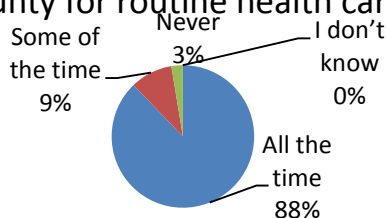
Mental health services are the hardest for Clancy residents to receive, while dental care and vision care are the easiest (Fig. 1).

Figure 2: Rating of Local Community Infrastructure and Services



The highest rated community infrastructure and services in Clancy are fire protection and law enforcement. The worst rated were senior care, walking paths, and mental health services (Fig. 2).

Figure 3: Does your family regularly go outside Jefferson County for routine health care?



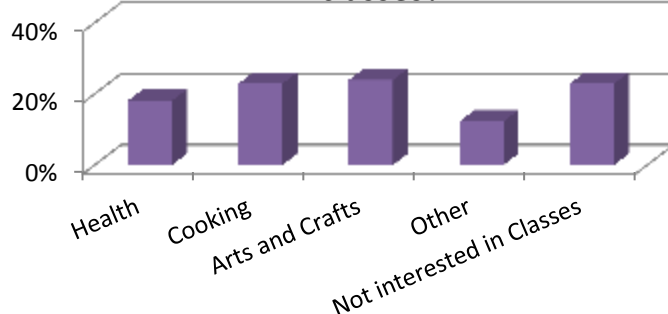
88% of Clancy residents regularly go outside the county for routine health care, much higher than the 59% of residents countywide (Fig. 3).

Table 2: If you have health insurance does it cover mental services?

Answer Options	Response Percent
Yes	71.0%
No	5.6%
I don't know	23.4%

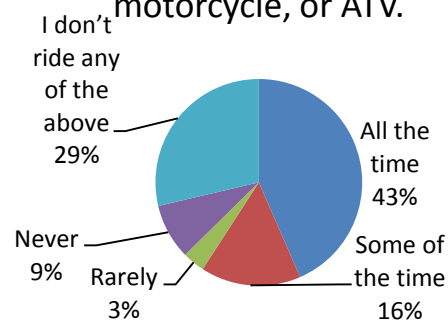
More Clancy residents know that their health insurance covers mental health services than residents countywide; 71% & 55% respectively (Table 2).

Figure 5: Would you be interested in classes?



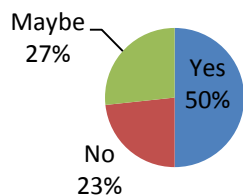
Clancy residents are most interested in cooking, and arts and crafts classes (Fig. 5).

Figure 4: I wear a helmet when riding a bicycle, motorcycle, or ATV.



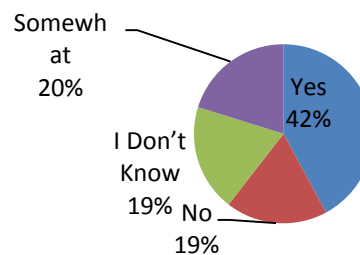
Clancy residents wear helmets more often than countywide; 43% & 24%, respectively (Fig. 4)

Figure 6: Would you exercise more if there were safer, or more numerous walking paths?



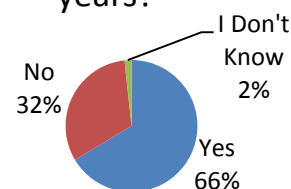
About 4 out of 10 residents feel there are plenty of activities to get exercise (Fig. 7), but half said they would exercise more if there were safer, more walking paths (Fig. 6).

Figure 7: There are plenty of activities in which I can get exercise in my COMMUNITY.



About 2 in 3 Clancy residents have tested their water compared to about the 41% of residents countywide (Fig. 8).

Figure 8: Have you tested your water for harmful chemicals in the last 5 years?



Jefferson City

Jefferson City has a population of 472 (2010), and a median age of 46.3 years old³. It is located 17 miles south of Helena on I-15. In the past Jefferson was a community of miners and ranchers, but the town has shrunk since the mines in this area closed. Over the last few years, population has swelled again in the form of housing communities, as workers in Helena move outside of Lewis and Clark County to take advantage of lower housing costs. While Jefferson City only has a poverty rate of 1.3%, 9.6% of residents 65 and older are considered at poverty¹. Many residents in Jefferson City go to Clancy or Montana City for their needs such as the library, and elementary schools.

Assets

Local Citizen Groups

Clancy School Board

Jefferson City Fire Department

Friends of Tizer Gardens

Jefferson VFD Trustees

Businesses/Institutions

Clancy School

Jefferson City Community
Center

Post Office

Clancy Library

Cribbage Bar

Tizer Gardens

Physical Assets

Transfer Station

Tizer Gardens

Jefferson City Community Center

Events

Jefferson City Annual Picnic

Kids day (fire department)

Jefferson City Easter Egg Hunt

Potential Projects

Classes in Community Center

Interviews

Several Jefferson City residents from all different walks of life were interviewed between December 2011 and February 2012 to gain perspective on what health needs and issues affect them. To reduce interviewer bias, respondents were quoted as much as possible with any paraphrasing repeated back to eliminate misunderstandings.

In general how would you rate the overall health and living conditions in your community? Is the community where you live feel connected?

Interview 1: Younger people have to commute long distances to work, or have to leave to get a future. Most of the town is older folks who have stuck around after growing up here, or young families who commute to Helena to work.

Transfer station is too small and in town which they don't like.

People's health is what they make of it. No health facilities in Jefferson City. Personal Health is fine. Not very active in the community anymore.

Interview 2: People's health is what they make of it. No health facilities in Jefferson City. Personal Health is fine. Not very active in the community anymore.

Compared to a few years ago, do you think health and living conditions in your community has improved, stayed the same, or declined? Why?

Interview 1: Two views of life here-the leave us alone even when their house is burning down. I'll wait and see group who are open to changes as long as they are deemed positive.

The town used to be much bigger with miners along with Wickes and it has declined after the mines closed. He says there has been an increase in population recently from people wanting to live outside of Helena, but commute for work.

A very positive addition to the community has been the renovation of the Jefferson City school into a community center, including a bathroom and kitchen. Rental fees are \$5 per hour for residents where admission is not charged. There is more work to be done at the center and these fees go towards future improvements which are accomplished by volunteers.

Interview 2: Same as far as your health. A lot of people who worked in mines didn't live in Jefferson City. Doesn't think mines had much to do with the health in the community. Admits not being really active in community. Businesses are limited, except for post office. Always been limited in the amount of business. Might be a need for a convenience store or something. Lots of subdivisions.

What factors have affected this change in your community?

Interview 1: Very informal communication network-Tings Bar, Post Office, Transfer Station or through word of mouth.

Interview 2: Lots of change. Used to be a small community and community minded. Now subdivisions are not community minded, people moved out to be out of a community. No neighborhoods for kids to play together. All the moving out has created more conflicts with wildlife.

Are there people or groups of people in whose health or quality of life may not be as good as others? Why?

Interview 1: Elderly with health problems-isolated but tend to have family that checks up on them. However they need to come forward about other needs they have to have.

Interview 2: Not sure that they have any other critical issues than a small town. Issue that there is no public transportation.

She has someone to take care of her when she gets to the point that she can't drive.

Before ranchers were the only ones who live outside of a community. But because of snow plows etc., they can put houses where people would have -Acreage not looked at farms but as so many houses. Hard to get farms established.

Positive to have a community center. Prices to rent are outrageous.

What needs to be done to address these issues?

Interview 1: Move transfer station outside of town

Interview 2: Transportation, insurance, gym in accessible, exercise is dictated on what you can do yourself.

Survey Results-Jefferson City

Table 1: Which do you think the following are concerns in the COUNTY?

Answer Options	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Alcohol Abuse	26%	41%	29%	3%	0%
Drug Abuse	32%	29%	35%	3%	0%
Access to Healthy Food	21%	32%	35%	9%	3%
Safety-Crime Related	21%	38%	35%	6%	0%
Safety-Design Related (includes adding stop signs, speed limits, crosswalks, or safe walking paths)	32%	32%	26%	6%	3%
Emergency Preparedness	24%	38%	32%	6%	0%
Services for the Elderly	29%	41%	26%	3%	0%
Mental Health Services	21%	36%	36%	6%	0%
Environmental-Human Related (includes water quality, industrial wastes, recycling etc.)	35%	26%	26%	6%	6%
Environmental-Nature Related (including preserving rivers, game, forests etc.)	32%	26%	32%	3%	6%
Education Opportunities for Adults	15%	24%	50%	12%	0%
Youth Activities	26%	32%	35%	6%	0%
Animal Control	32%	35%	26%	3%	3%
Opportunities to Exercise for All	15%	45%	30%	6%	3%
Domestic Violence	24%	27%	42%	6%	0%
Availability of Health Services	32%	35%	29%	3%	0%
Preserving our Heritage	15%	44%	38%	3%	0%

In Jefferson City, residents are more concerned about services for elderly, animal control, and availability of services than drug abuse, environmental-human related, or youth activities.

Jefferson City residents feel law enforcement and fire protection are considered the best of services, while senior care and walking paths were given the worst ratings. Many residents felt that city water, senior care, and mental health services were not applicable to them (Fig. 1).

Figure 1: Rating of Local Community Infrastructure and Services

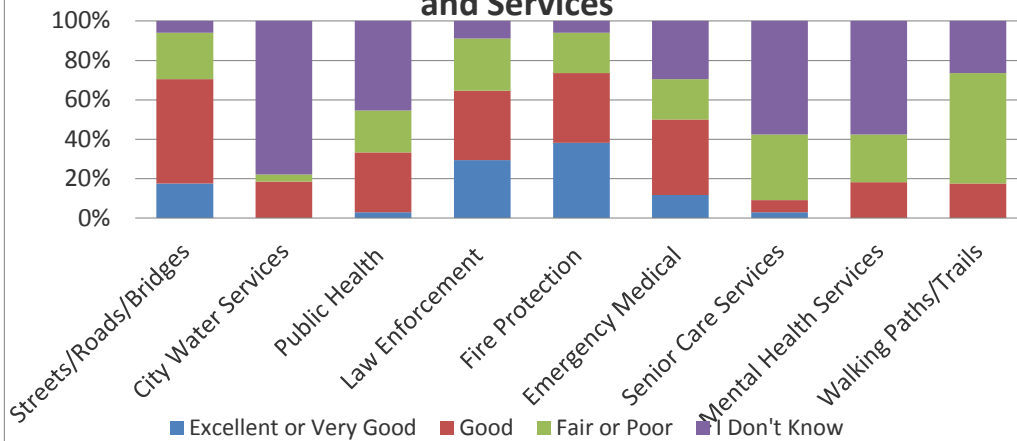
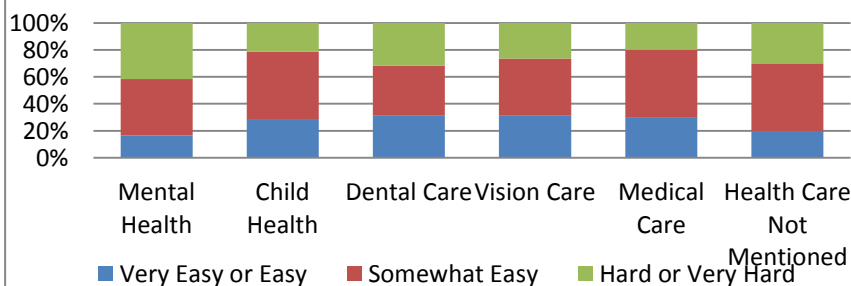
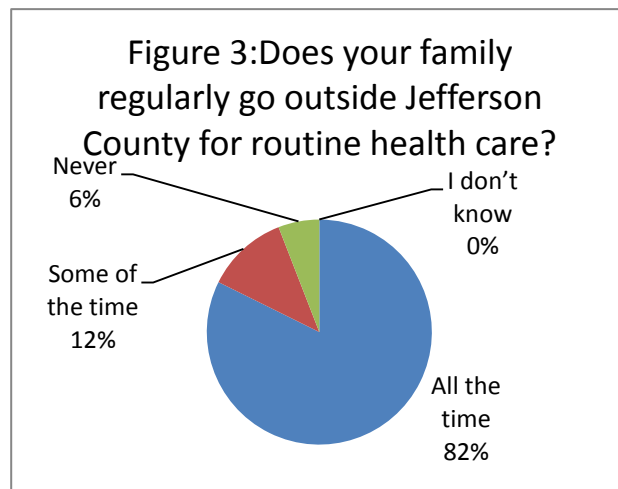
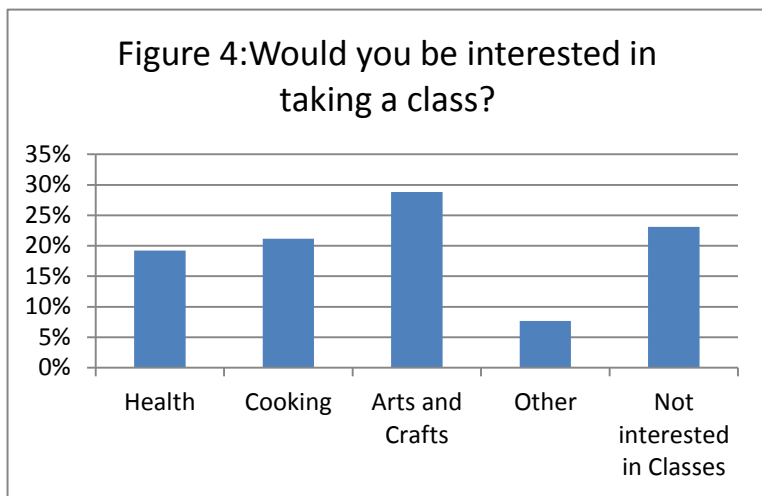


Figure 2: How easy it is for people in your community to get services?

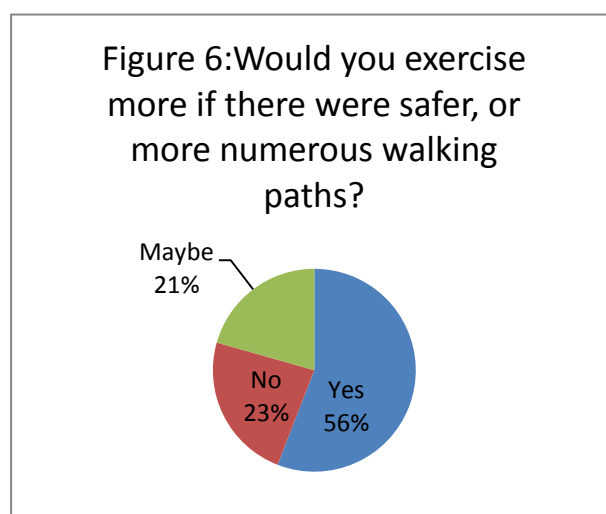
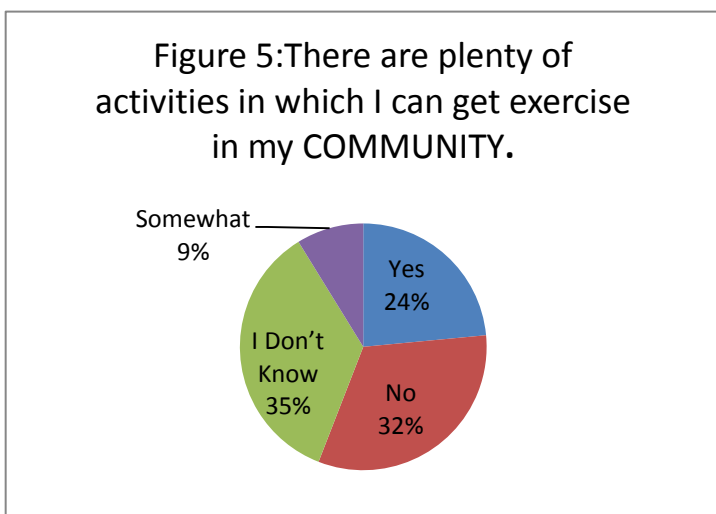


Jefferson City residents consider most services somewhat easy, easy, or very easy to get. Mental health is considered the hardest service to receive (Fig. 2).

82% of Jefferson City residents go outside the county for routine health care compared to countywide residents at 59% (Fig. 3).

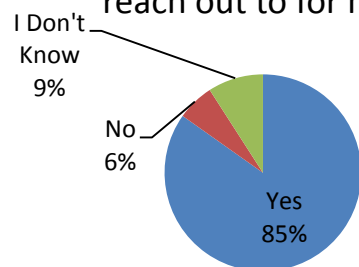


Jefferson City residents are most interested in arts and crafts classes (Fig. 4).



About a quarter of residents feel there are plenty of activities to get exercise, and over half said they would exercise more if there were safer, more walking paths (Fig 5 & 6).

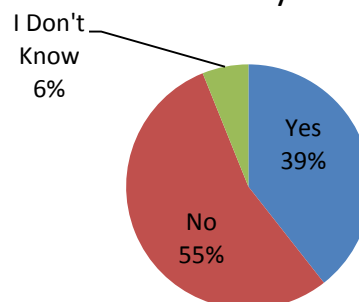
Figure 7: If I was having a rough time there are people I could reach out to for help.



A high percentage of Jefferson City residents feel they have someone they could reach out to for help compared to residents countywide; 85% & 72% respectively (Fig. 7).

About 39% of Jefferson City residents have tested their water compared to about the 41% of residents countywide (Fig. 8).

Figure 8: Have you tested your water for harmful chemicals in the last 5 years?



Montana City

Montana City is located just south of the county lines with a population of 2,715 (2010), and a median age of 45.3 years old₃. It is located close to the capital city of Helena and has its own elementary school. While Montana City is its own separate area, it is considered part of Clancy for most census purposes. Many residents get their services in Helena.

Assets

Local Citizen Groups

Eagle Ambulance

Montana City School PTA

Montana City Fire Department

Businesses/Institutions

Ash Grove Cement Plant

Elkhorn Vision Center

Montana City Dental Clinic

Clancy Library (Clancy)

Hardware Café

Montana City School

Physical Assets

Ash Grove Park

Sidewalk along frontage road to Helena

Climbing wall (school)

Proximity to Helena

Events

Clancy Days (Clancy)

Monster Mash

Volunteer Fire Dept.

Family Game Night (School)

Special Olympics

Easter Egg Hunt

Montana City Days

Tree Burn

Potential Projects

Water testing

High School in Northern End

Community Center

Interviews

Several Montana City residents from all different walks of life were interviewed between December 2011 and February 2012 to gain perspective on what health needs and issues affect them. To reduce interviewer bias, respondents were quoted as much as possible with any paraphrasing repeated back to eliminate misunderstandings.

Please tell me briefly about the work you and your organization does in the community?

Montana City School-PTA –Community Type activities such as the MONSTER MASH in Halloween

Improving playground areas and trail systems around the school

Family Fun Night-School oriented. Might be open to community

New gym is being built.

PTA Brought a Climbing wall for kids-Community members working on making wall open to reserve the climbing wall for the public.

Special Olympics Director in the area

In general how would you rate the overall health and living conditions in your community? Is the community where you live feel connected?

Montana City has people that are fairly well off, suburb of Helena that are middle class, but have to take care of yourself, shovel your drive way etc.

Less poverty issues, neglect, abuse than other areas of the county.

Community Feeling- before kids started school did not feel connected to the community. Only Community function is the Christmas tree burn.

Get info from Boulder monitor, locally owned gas station, chubbys

Compared to a few years ago, do you think health and living conditions in your community has improved, stayed the same, or declined? Why?

More opportunities to be healthy, trails that they have built. Ash grove has a nice park. Walking paths to schools.

Otherwise stayed the same.

No presence of fast food stores.

What factors have affected this change in your community?

Are there people or groups of people in whose health or quality of life may not be as good as others? Why?

People with disabilities are more isolated. Cold weather causes isolation. Issue everywhere in MT.

Stoneybrook-retirement home. Assisted living in Clancy

b. Why do you think their health/quality of life is not as good as others?

In your opinion, what are the most critical issues in your community?

Lack of Communication. Boulder Monitor reports mostly on Boulder, and Helena IR reports mostly on Helena. There is a school newspaper that goes out, but that only benefits parents in the community.

Trails on the frontage road. Or side walk on the side. I see people walking/biking on the sidewalk all the way to Helena. But south of Montana City the road get much narrower and more windy. It is quite risky to walk on this road now as is. I think it would be used all the way into Boulder if a proper sidewalk was put in.

Promoting physical activity and safety. County safety-volunteers patrol a lot of the county. Support the volunteers (with radios). Awareness on safety issues, primarily on-locked cars and garages. Disabled and poverty people have a right to safety.

Fire Calls-just put on the fire map. Had volunteer come up to door to add their house on the fire map. If people where aware they needed to be added to the fire map than people would add themselves.

What barriers exist to improving health and making changes?

Knowing how to focus on needs.

Communication

Resources

Clancy-Montana City dynamic "I don't consider myself part of Clancy until I have to go sign for a package."

Survey Results-Montana City

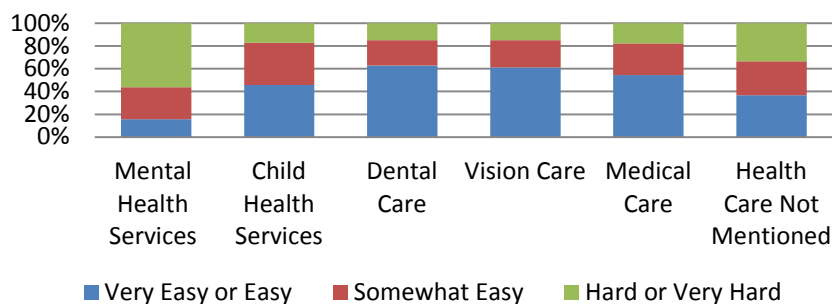
Table 1: What do you think the following are concerns in the COUNTY?

What do you think the following are concerns in the COUNTY?

Answer Options	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Alcohol Abuse	27%	34%	31%	6%	2%
Drug Abuse	17%	53%	22%	6%	2%
Access to Healthy Food	17%	34%	34%	11%	3%
Safety-Crime Related	15%	52%	26%	8%	0%
Safety-Design Related (includes adding stop signs, speed limits, crosswalks, or safe walking paths)	16%	44%	32%	8%	0%
Emergency Preparedness	28%	40%	25%	8%	0%
Services for the Elderly	17%	47%	30%	6%	0%
Mental Health Services	17%	28%	47%	5%	3%
Environmental-Human Related (includes water quality, industrial wastes, recycling etc.)	38%	34%	14%	12%	2%
Environmental-Nature Related (including preserving rivers, game, forests etc.)	26%	42%	20%	11%	2%
Education Opportunities for Adults	10%	30%	44%	16%	0%
Youth Activities	17%	48%	30%	5%	0%
Animal Control	20%	32%	37%	11%	0%
Opportunities to Exercise for All	21%	31%	29%	15%	5%
Domestic Violence	16%	35%	40%	8%	0%
Availability of Health Services	21%	35%	32%	13%	0%
Preserving our Heritage	8%	33%	47%	11%	2%

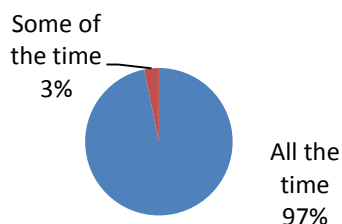
In Montana City, residents feel emergency preparedness and environmental-nature related are greater concerns than alcohol abuse and youth activities (Table 1).

Figure 1: How easy it is for people in your community to get services?



Mental health services are the hardest for Montana City residents to get, while dental care and vision care are the easiest to receive (Fig. 1).

Figure 2: Does your family regularly go outside Jefferson County for routine health care?

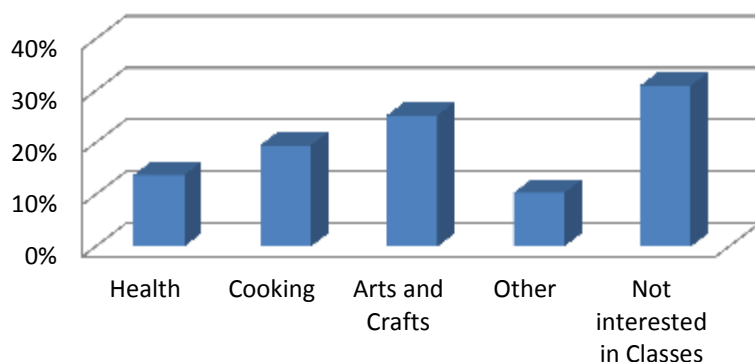


Almost every Montana City resident said they regularly go outside the county for routine health care (Fig. 2).

60% of Montana City residents do not know what services the Jefferson County Public Health Department provides, far higher than the 44% of residents countywide (Table 2).

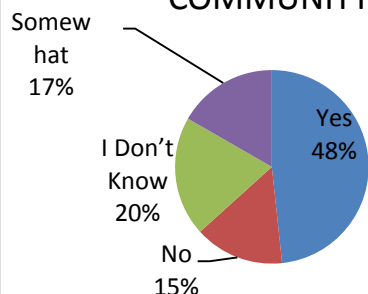
Table 2: Are you aware of what services the Jefferson County Public Health Department provides?	
Yes	6%
I know of some services, but not sure if that's all	33%
No	60%

Figure 3: Interest in Classes



Montana City residents would prefer arts and crafts class (Fig 3).

Figure 4: There are plenty of activities in which I can get exercise in my COMMUNITY.



About half of Montana City residents feel there are plenty of activities where they can get exercise, and 41% feel they would exercise more if there were more, safer walking paths (Fig. 4 & 5).

Figure 5: Would you exercise more if there were safer, or more numerous walking paths?

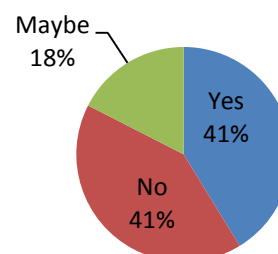
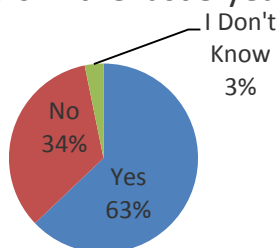


Figure 6: Have you tested your water for harmful chemicals in the last 5 years?



Almost 2 out of every 3 Montana City residents have tested their water for harmful chemicals (Fig. 6).

Whitehall

Whitehall is an incorporated town, with a ranching and mining community, a total population of 1038, and a median age of 45.7 years old ³. The poverty rate, or rate of family thresholds that are less than their total income, for Whitehall is 13.9%. It is centrally located between Butte and Bozeman in the heart of several beautiful mountain ranges. Running through Whitehall are two rivers, Whitetail River and Pipestone River, and three highways, Interstate 90 and State Highway 69 and 55. Whitehall has an elementary, middle, and high school, as well as a library and county health department. Its main attractions include the Lewis and Clark Murals, Lewis and Clark Caverns, and the Jefferson Valley Museum.

Assets

Local Citizen Groups

Ambulance	Jefferson Local Development Corporation	St. Teresa Catholic Church
American Legion Post #24		Trinity United Methodist Church
ATV Association Pipestone Trails	Jefferson Valley Baptist Church	
Chamber of Commerce	Jefferson Valley Community Foundation	United Church of God
Church of Jesus Christ	Kingdom Hall Jehovah Witnesses	Veterans of Foreign Wars #4603
Community Center	Lewis and Clark Park	Volunteer Fire Department
Community of Christ Church	Ministerial Association	Whitehall Assembly of God
First Christian Church	PTSA	Whitehall Booster Club
Head Start	Rodeo/Baseball Fields	Whitehall Rotary Club
Jefferson County Extension Office	Senior Citizen Center	Whitehall Saddle Club
		Zion Lutheran Church

Businesses/Institutions

See Appendix A

Physical Assets

Bike/Skate Park	Hiking
Cross Country Ski/Snowshoeing	Horseback
Fishing	Community Pool

Events

Christmas Stroll	Rodeo	Gun Shows Spring and Fall
Frontier Days	Sports fields	Easter Egg Hunt

Fall Festival	Rotary Casino Night Fundraiser	Monthly
Black Tie & Blue Jean Fundraiser	Senior Citizen Bingo 2 nd Tuesday	Veterans Bingo 3 rd Tuesday Monthly

Potential Project

Safe Routes to School

Interviews

Several Whitehall residents from all different walks of life were interviewed between December 2011 and February 2012 to gain perspective on what health needs and issues affect them. To reduce interviewer bias, respondents were quoted as much as possible with any paraphrasing repeated back to eliminate misunderstandings.

In general how would you rate the overall health and living conditions in your community? Does your community feel connected?

Interview 1: Pretty good and healthy

Interview 2: Small community, look out for each other and helping each other, great

Interview 3: Good, not excellent, average, right in the middle

Interview 4: Good, we have a lot of good active minded community members

Interview 5: Average, both sick and well people, lucky to have a medical clinic [in Whitehall]

Compared to a few years ago, do you think health improved, stayed the same, or declined? Why?

Interview 1: People live longer and better, more awareness out there about health

Interview 2: Declined because people have had to move on for jobs, lower income families; don't know as many people in town, not as safe

Interview 3: Same, nothing has happened to change it

Interview 4: It's done both, national level times are tougher but in our community there have been a lot of positive change

Interview 5: Improved, there have been a lot of improvements to the city, park fixed up, new sewer, plugins for visitors, new ambulance barn

What factors have affected the health in your community?

Interview 1: Taking care of self, aware of what's in the environment, eating organic foods (vegetables, meats)

Interview 2: Economy, job availability, stress on the school, special needs

Interview 3: Weather, people of attitudes, income is fairly high so that helps (In Jeff County), community weight room that a lot of people use

Interview 4: Economics number one – lot of people without work. Increase job the stronger the community

Interview 5: Civic organizations work on city, veterans club, city administration

Are there people or groups of people in Jefferson County whose health or quality of life may not be as good as others? Why?

Interview 1: Probably, economics and insurance cause difference
Low income, older folks

Interview 2: Lots of people that don't have vaccinations due to belief, no steady income, gym is now closed. Lower income, John Birchers – against government

Interview 3: No specific groups, it's across the board

Interview 4: Yes, economics – people who have a job in the summer sometimes don't have one in the winter

Interview 5: With unemployment people can't afford health insurance. We need more benefits given for health. - Unemployed and homeless

Why do you think their health/quality of life is not as good as others?

Interview 1: Access to medications/doctors

Interview 2: Vaccination, without money they can't get the health care that they need

Interview 3: No money

Interview 4: They don't have the security that's year round which plays into everything: insurance, employment ("enough quarters")

In your opinion, what are the most critical issues in your community?

Interview 1: Healthcare, more programs through public health such as family planning, mental health

Interview 2: Habits such as bars, small town community, weather affecting getting out and doing things

Interview 3: It's always the same people doing the work, more volunteer minded people, the givers and takers

Interview 4: A lot of pressure is put on the city council to meet the needs of the community

Interview 5: Jobs – Unemployment in Whitehall

What needs to be done to address these issues?

Interview 1: Economic growth, growing elderly population, keep small community feel, more job opportunities for young adults

Interview 2: Funding through grants

Interview 3: Need more awareness maybe through county, tobacco prevention, incentives to quit

Interview 4: City council – some branched off so that it's not all government

Volunteer – you can't make people volunteer, people who raise children have more invested, you'll see investments

Interview 5: Change Congress, people have lost faith

What barriers exist to improving health and making changes?

Interview 1: No businesses coming in, [Whitehall] main street needs to be redone, need to be competitive with Butte, mine shutting down

Interview 2: Economy, better choices for funding, unaware of local choices

Interview 3: Attitude, willingness to change lifestyle

Interview 4: Financial, community health center are wonderful thing and based on money, a lot of people don't go to the doctor or get medicine because no finances or insurance

Interview 5: Term limits for representatives, "they find a home in congress", money is buying representatives

Survey Results-Whitehall

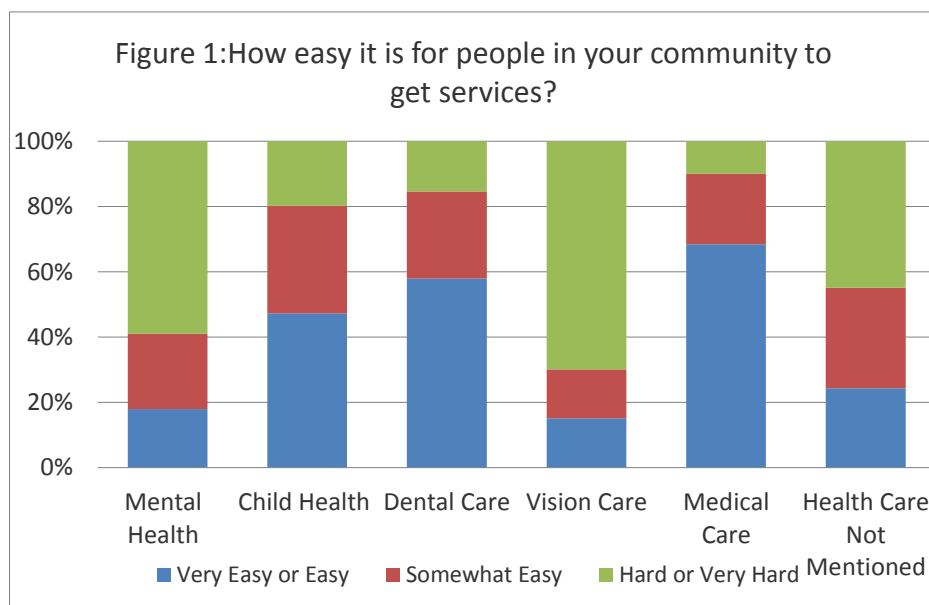
The selected results from the countywide survey include responses only from residents that identified themselves as living in Whitehall or Cardwell. Responses are presented as raw data, and therefore unweighted. Graphs shown were either vital to the understanding the community or chosen because of the great contrast when compared to the countywide raw data.

Table 1: What do you think the following are concerns in the COUNTY?

What do you think the following are concerns in the COUNTY? Please check only one answer per row.

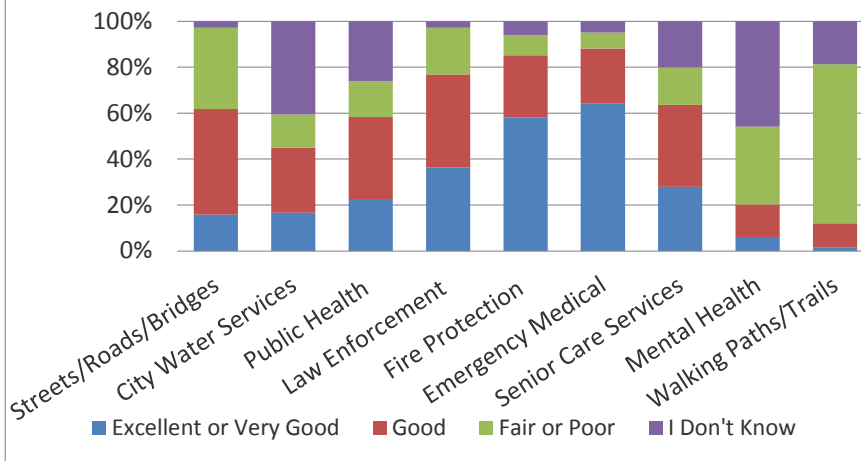
Answer Options	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Alcohol Abuse	44%	35%	17%	3%	0%
Drug Abuse	46%	36%	14%	3%	1%
Access to Healthy Food	20%	35%	28%	14%	3%
Safety-Crime Related	14%	46%	27%	13%	0%
Safety-Design Related (includes adding stop signs, speed limits, crosswalks, or safe walking paths)	17%	34%	30%	16%	3%
Emergency Preparedness	24%	38%	29%	8%	1%
Services for the Elderly	23%	39%	27%	10%	1%
Mental Health Services	15%	39%	35%	10%	1%
Environmental-Human Related (includes water quality, industrial wastes, recycling etc.)	26%	38%	23%	11%	2%
Environmental-Nature Related (including preserving rivers, game, forests etc.)	21%	42%	26%	8%	3%
Education Opportunities for Adults	18%	40%	31%	9%	2%
Youth Activities	27%	42%	23%	7%	2%
Animal Control	28%	32%	27%	10%	2%
Opportunities to Exercise for All	17%	38%	29%	14%	2%
Domestic Violence	19%	33%	42%	5%	1%
Availability of Health Services	27%	38%	21%	13%	1%
Preserving our Heritage	14%	33%	40%	11%	2%

In Whitehall, residents feel availability of health services is a greater concern than environmental-human related services (Table 1).



The hardest services for residents to receive are mental health and vision care, while the easiest are medical care and dental care (Fig 1).

Figure 2: Rating of Local Community Infrastructure and Services



Emergency medical and fire protection services were rated the best in infrastructure and services, while walking paths, mental health, and streets, roads and bridges were rated the worst (Fig. 2).

Far more Whitehall resident go outside the county for health care some of the time rather than all the time, which contrast residents countywide who go out of the county some of the time less than all of the time (64% & 30% compared to 38% & 59%, respectively) (Fig. 3).

Figure 3: Does your family regularly go outside Jefferson County for routine health care?

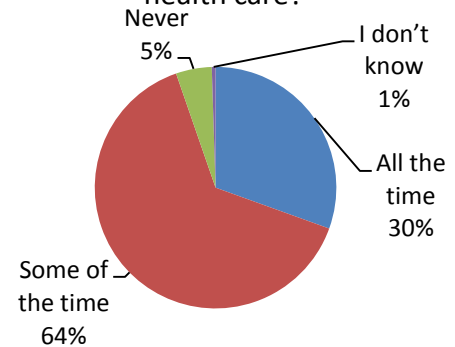
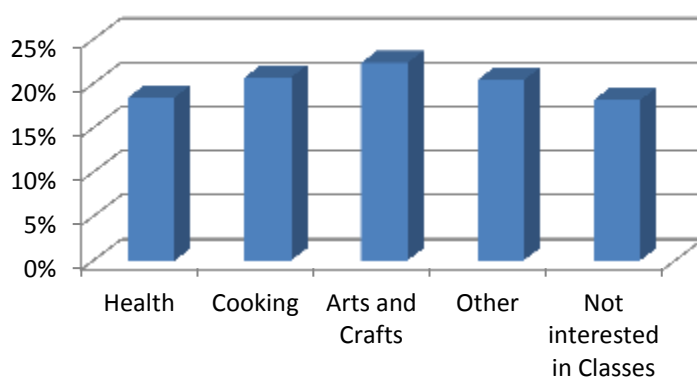
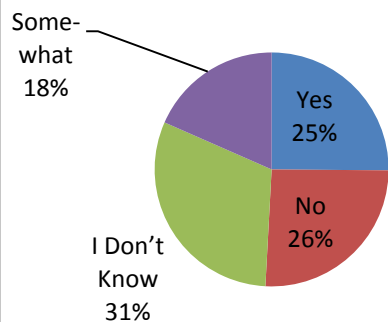


Figure 4: Interest in Classes



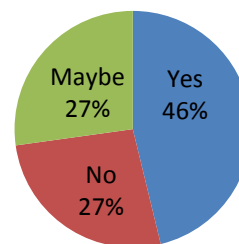
Whitehall residents prefer Arts and Crafts class (Fig. 4).

Figure 5: There are plenty of activities in which I can get exercise in my COMMUNITY.



A quarter of residents feel there are plenty of activities that they can get exercise, while close to a half of residents said they would exercise if there were more safer, and numerous walking paths (Fig. 5 & 6).

Figure 6: Would you exercise more if there were safer, or more numerous walking paths?



Local Public Health System Assessment

2012

This assessment evaluates the current local public health systems effectiveness through measures of the ten essential services.

The National Public Health Performance Standards Program

Local Public Health System Performance Assessment Report of Results

A. The NPHPSP Report of Results

I. INTRODUCTION

The National Public Health Performance Standards Program (NPHPSP) assessments are intended to help users answer questions such as "What are the activities and capacities of our public health system?" and "How well are we providing the Essential Public Health Services in our jurisdiction?" The dialogue that occurs in answering these questions can help to identify strengths and weaknesses and determine opportunities for improvement.

The NPHPSP is a partnership effort to improve the practice of public health and the performance of public health systems. The NPHPSP assessment instruments guide state and local jurisdictions in evaluating their current performance against a set of optimal standards. Through these assessments, responding sites consider the activities of all public health system partners, thus addressing the activities of all public, private and voluntary entities that contribute to public health within the community.

This report provides a summary of results from the NPHPSP Local Public Health System Assessment (OMB Control number 0920-0555, expiration date: August 31, 2013). The report, including the charts, graphs, and scores, are intended to help sites gain a good understanding of their performance and move on to the next step in strengthening their public system.

II. ABOUT THE REPORT

Calculating the scores

The NPHPSP assessment instruments are constructed using the Essential Public Health Services (EPHS) as a framework. Within the Local Instrument, each EPHS includes between 2-4 model standards that describe the key aspects of an optimally performing public health system. Each model standard is followed by assessment questions that serve as measures of performance. Each site's responses to these questions should indicate how well the model standard - which portrays the highest level of performance or "gold standard" - is being met. Sites responded to assessment questions using the following response options below. These same categories are used in this report to characterize levels of activity for Essential Services and model standards.

NO ACTIVITY	0% or absolutely no activity.
MINIMAL ACTIVITY	Greater than zero, but no more than 25% of the activity described within the question is met.
MODERATE ACTIVITY	Greater than 25%, but no more than 50% of the activity described within the question is met.
SIGNIFICANT ACTIVITY	Greater than 50%, but no more than 75% of the activity described within the question is met.
OPTIMAL ACTIVITY	Greater than 75% of the activity described within the question is met.

Using the responses to all of the assessment questions, a scoring process generates scores for each first-tier or "stem" question, model standard, Essential Service, and one overall score. The scoring methodology is

available from CDC or can be accessed on-line at <http://www.cdc.gov/nphpsp/conducting.html>.

III. TIPS FOR INTERPRETING AND USING NPHPSP ASSESSMENT RESULTS

The use of these results by respondents to strengthen the public health system is the most important part of the performance improvement process that the NPHPSP is intended to promote. Report data may be used to identify strengths and weaknesses within the local public health system and pinpoint areas of performance that need improvement. The NPHPSP User Guide describes steps for using these results to develop and implement public health system performance improvement plans. Implementation of these plans is critical to achieving a higher performing public health system. Suggested steps in developing such improvement plans are:

1. Organize Participation for Performance Improvement
2. Prioritize Areas for Action
3. Explore "Root Causes" of Performance Problems
4. Develop and Implement Improvement Plans
5. Regularly Monitor and Report Progress

Assessment results represent the collective performance of all entities in the local public health system and not any one organization. Therefore, system partners should be involved in the discussion of results and improvement strategies to assure that this information is appropriately used. The assessment results can drive improvement planning within each organization as well as system-wide. In addition, coordinated use of the Local Instrument with the Governance Instrument or state-wide use of the Local Instrument can lead to more successful and comprehensive improvement plans to address more systemic statewide issues.

Although respondents will ultimately want to review these results with stakeholders in the context of their overall performance improvement process, they may initially find it helpful to review the results either individually or in a small group. The following tips may be helpful when initially reviewing the results, or preparing to present the results to performance improvement stakeholders.

IV. FINAL REMARKS

The challenge of preventing illness and improving health is ongoing and complex. The ability to meet this challenge rests on the capacity and performance of public health systems. Through well equipped, high-performing public health systems, this challenge can be addressed. Public health performance standards are intended to guide the development of stronger public health systems capable of improving the health of populations. The development of high-performing public health systems will increase the likelihood that all citizens have access to a defined optimal level of public health services. Through periodic assessment guided by model performance standards, public health leaders can improve collaboration and integration among the many components of a public health system, and more effectively and efficiently use resources while improving health intervention services.

B. Performance Assessment Instrument Results

I. How well did the system perform the ten Essential Public Health Services (EPHS)?

Table 1: Summary of performance scores by Essential Public Health Service (EPHS)

EPHS		Score
1	Monitor Health Status To Identify Community Health Problems	45
2	Diagnose And Investigate Health Problems and Health Hazards	67
3	Inform, Educate, And Empower People about Health Issues	51
4	Mobilize Community Partnerships to Identify and Solve Health Problems	37
5	Develop Policies and Plans that Support Individual and Community Health Efforts	52
6	Enforce Laws and Regulations that Protect Health and Ensure Safety	79
7	Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	56
8	Assure a Competent Public and Personal Health Care Workforce	48
9	Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services	16
10	Research for New Insights and Innovative Solutions to Health Problems	40
Overall Performance Score		49

Figure 1: Summary of EPHS performance scores and overall score (with range)

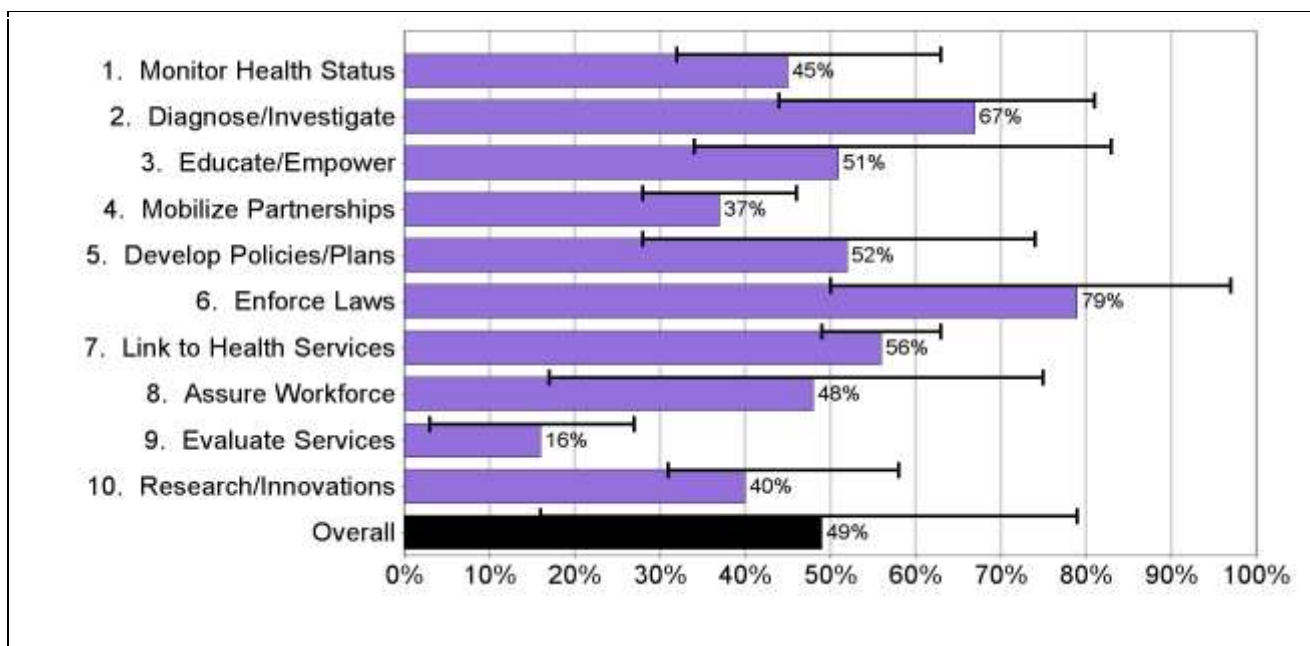


Table 1 (above) provides a quick overview of the system's performance in each of the 10 Essential Public Health Services (EPHS). Each EPHS score is a composite value determined by the scores given to those activities that contribute to each Essential Service. These scores range from a minimum value of 0% (no activity is performed pursuant to the standards) to a maximum of 100% (all activities associated with the standards are performed at

optimal levels).

Figure 1 (above) displays performance scores for each Essential Service along with an overall score that indicates the average performance level across all 10 Essential Services. The range bars show the minimum and maximum values of responses within the Essential Service and an overall score.

Figure 2: Rank ordered performance scores for each Essential Service

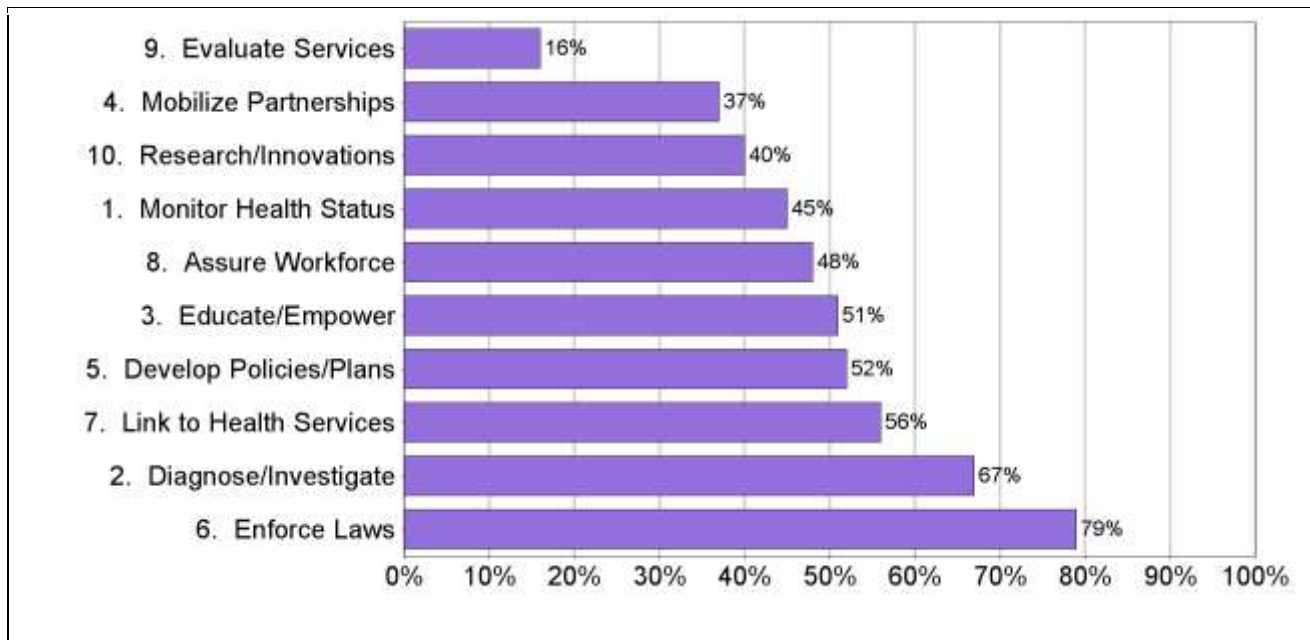


Figure 3: Rank ordered performance scores for each Essential Service, by level of activity

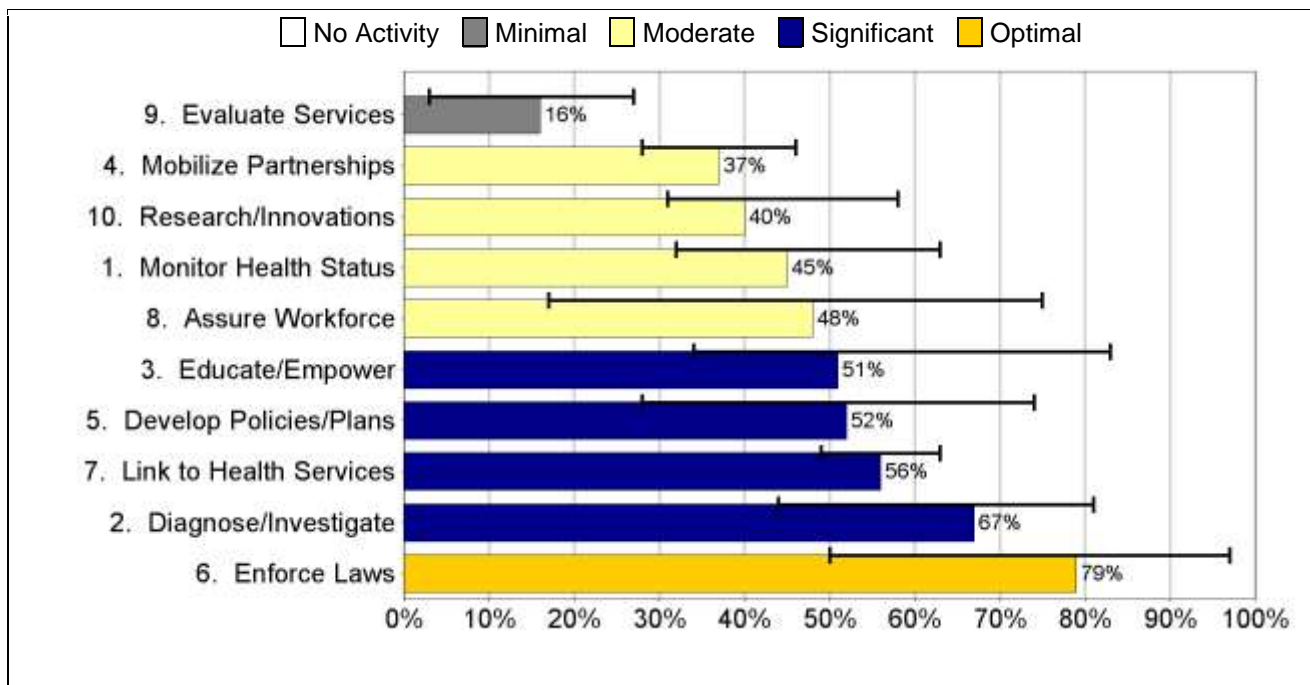


Figure 2 (above) displays each composite score from low to high, allowing easy identification of service domains where performance is relatively strong or weak.

Figure 3 (above) provides a composite picture of the previous two graphs. The range lines show the range of responses within an Essential Service. The color coded bars make it easier to identify which of the Essential Services fall in the five categories of performance activity.

Forces of Change Assessment

2012

This assessment is focused on understanding and outlining trends, events, and factors affecting the health of our county either directly or indirectly.

Forces of Change

Interviews were conducted with community members to gather information on what forces, such as legislation and/or technology have impacted community health in the past, and what trends they see impacting their communities in the future. Residents were asked to list possible problems as well as opportunities for addressing these issues.

Health Factors

Health & Fitness	More for senior citizens (i.e. fitness, transportation to programs) Need extended hours for the health department (for the flu season) & other medical services	Pool – water aerobics/lap swim Sponsor walk to school Zumba/pilates/dance (studio, instructor) Promote winter sports School system is doing a drive to find new equipment
Safety Healthcare availability	Skate parks close to highway, kids don't wear helmets No safe bicycle lane, walking paths Waiting to get medical treatment Higher demand from more people in the state and tourist	Teen center – advertise, more volunteers, better hours; more for kids to do Safety fair (continue/expand) Healthcare reform
General interest in health	No healthcare for kids Safety issues with walking	More people find out about other health programs (state health program) More people are walking and sellers at the farmers market
Vulnerability to sickness	Losing the close and personal connection of local doctors	Central location for medical talent
Physical Exercise	New doctors/physicians might be lower quality	Loan forgiveness to get new talent

Political

Political	Tax payers resist putting more money into a shrinking district	Elections happening now
Redistricting	Less of a voice for Jefferson County	
Socialized medicine	Warehoused health care leads to poor health care	More awareness of proper nutrition
Better wellness care	Increase chance of contracting a chronic illness	Longer life span
Possibly lose the Golden Sunlight mine	Price of minerals (gold) fluctuating, no idea of when the mine will close	(professional and laborers) – good paying jobs and talent, JLDC looking into it, Wind Resource, educated people coming in
Change in local businesses	Raghorn Saloon, Gallery, Ranching Burger, Dentist	New businesses: Dentist office, Boulder River Restaurant

Ethical

Obama Health Care	People don't like it ("Obama care is a disaster") - culture of Medicare	Healthcare for people with pre-existing conditions
No health insurance	Reliant on government Very expensive	Keeping kids on parents healthcare longer Less waste - "Suck it up" mentality

Science & Technology

Technology	-Kids don't get outside-obesity, too much time in the house Local grocery has low quality foods Dangerous use on roads to self and others - discourages bike and walking on roads	Video games develop more dexterity Internet-more knowledge which can health related Drunk driving campaign (Maria's Challenge) doing very well Access to information, trainings - more accountability since info is there Telemedicine conferences with medical professionals
High Voltage Power Lines - MTSI	Unknown negative effects on health of cows and humans. They want to put in new lines that are needed. Energy comes from outside of state.	

Environmental

Wolves	Carry diseases. More wolves in the area = more chances for contact.	
Youth Nutrition	Hard to buy organic healthy food Increase in type II diabetes	Community Garden in Whitehall Sustainable Forest Lots of people with gardens in communities
Pine beetles	Lots of dead trees in the forest. Trees falling over Fire risk Can't cut down these trees.	More water in the aquifers with less trees. Firefighters do a good job fighting fires
Weed and Mosquito Control	Harder to control due to less people involved and lower funds available Spread of disease and ecosystem impacts.	Spray program done by helicopters and fume trucks Large sum of money to fight weeds in Elkhorn Education programs

Legal

Restrictions on mining & foresting	Hard to get permits and use the resources around for bringing in money	People are pretty resourceful. Someone will find a way to utilize the resources we can.
Presence of attorneys in Whitehall	only one person and the law office is up for sale Higher need – increase in lawsuits	

Social

Forces (Trends, Events, Factors)	Threats Posed	Opportunities Created
Population	Increase in population requiring need for more services More people = congestion and pollution - compromising the integrity and small town feel Aging population (young people moving out and retired people moving in) – more health issues	Attract more healthcare professionals Growing economy Trend toward eating healthier
Aging County Population	An aging population that is unable to get their needs met due to limited mobility and lack of support systems Potential Isolation for elderly Having to move out of the county when unable to live on own Social aging population may not be as keyed in needs of families with children or even young adults (exercise, safety)	Senior Centers-expand upon programs Boulder Assisted Living Building in possible development.
Influx of people settling in Northern End of County	-Water Sanitation problem with increased housing -Dissent about lack of High School in the Northern End. Split in the high school kids between Jefferson and L&C High	Create Water district (but will be expensive)
Country lifestyle	Hard to keep kids entertained these days unless there is lots of action or fighting.	Safer for kids to get outside and do whatever More opportunities to hike, fish etc.
Culture	Both parents work. No one home to encourage outdoor activity, keep the kids outta trouble. They have more freedom than before. Safety such as wearing helmets is shamed Anti-gov. sentiment - against receiving services Slow to accept change	Slower way of life. Encouraging volunteerism and leadership Outdoor activities (hiking, camping, biking) - people more fit than urban Safety is on peoples mind - conscious of dangers posed by not wearing seatbelt or helmets
Communities	Not as much stuff for youth to do such as movie theaters, youth center etc. Kids are more likely to get in trouble or do drugs if they don't have stuff to do. Stray dogs and cats Unkempt yards and homes	Kids get out and exercise more Activities for younger people are improving
Immunization	Homeschool students are not immunized like their school peers. There are still lots of parents who opt out of vaccines for various reasons.	More immunized than in the past School Roundup
Transient Community	People come here often to get a job with the state institutions, save up money, and leave Losing residents to the oil boom	Clancy is planning a wastewater project
Education	Many residents in the Northern end go to high school in Helena, less students in Jefferson High than should be leads to lowered funds for school Splits children up who have gone to school together Bullies in schools – cause homeschooling and going to other schools, no consequences for bullying	How can we entice parents to enroll their students in Jefferson High over Helena High. Paramedicine program Support for Classes – Health education, Safety classes – CPR classes, Adult education classes, Car seat class

Economic

Economy	<p>Large amount of people on welfare without jobs</p> <p>People moving away, less teacher and nurse hiring at the schools</p> <p>Cutting corners with health</p> <p>Limited awareness</p> <p>Business not offering healthcare</p> <p>Young adults looking for employment out of the county</p>	<p>Richer northern population which disguises poverty in other communities.</p> <p>Sunlight Business Park – money available for small business</p> <p>Make the community more appealing by highlighting our natural beauty, parks, attempting to get walking trails</p> <p>Some businesses having their best year</p>
School Athletics	<p>Cut Funding</p> <p>Losing children's interest</p> <p>Less active lifestyles</p>	<p>Encourages kids to be active</p> <p>Get more sports sanctioned through the schools (i.e. soccer)</p>
No more community change program	No rehabilitation for youth violations	<p>Dui Taskforce is still operating</p> <p>Still volunteer hours for youth caught drinking</p>
High Poverty Level in parts of county	A large portion of school students in Boulder and Whitehall are on free or reduced lunch	
No school nurse in Whitehall school	<p>People being displaced from senior homes</p> <p>Budget constraints</p>	Reassessing priorities
Challenge in funding - Federal money is drying up	<p>Different realities (diff between haves and have nots)</p> <p>Less private philanthropy - feel more in years to come</p>	<p>Local community foundation – Self-support;</p> <p>Golden Sunlight Mine sponsor safety fair and value safety in the workplace</p>
Less money available from the federal government	Less money is available for small counties to do improvement projects.	
Lack of affordable housing in towns	There are lots of homes on the market, but not a lot of rental property.	<p>Opportunity for transient population to establish themselves in community. For the most part feels that communities are very friendly and open in county.</p>
Infrastructure	<p>Hard to finance without federal assistance-lack of assistance for these types of programs. Even low interest loans would be beneficial, but there aren't any.</p> <p>Need facility for exercise programs such as dance, zumba, and aerobics</p>	<p>Could do super cheap street/traffic adjustments</p> <p>Community garden – fresh food</p> <p>Use school for walking during winter</p> <p>Concerts in the park</p> <p>Winter carnival</p>
Water Infrastructure	<p>Older house lot are small with older septic systems.</p> <p>Older septic systems are collapsing</p> <p>Grants for water infrastructure are being cut or eliminated</p> <p>Exempt wells may be taking water from ranchers.</p>	<p>Water quality studies are being conducted</p> <p>Dead trees is allowing more water to stay in the ground</p>
Lose of medical professionals in Whitehall	<p>All on private sector - to do walking trails</p> <p>Sickness can spread easily in this small community</p>	<p>Better transportation to healthcare (need in Boulder)</p> <p>County is revamping their emergency response system</p>

Appendix A – Whitehall Assets

Businesses/Institutions

4 Rivers Concrete	Briggs Ranch & Qtr Horses	Cook's Mobile Weld & Repair
A & G Custom Farming	Bryant Edsall Antiques	Corner Store
A Insurance Agency For You	Buckley Powder Co.	Cottage Floral
A New Arrival Inc	Cactus Junction Equine Rescue	Country Comfort Massage
A&W/KFC	Cape Horn Taxidermy	Country Peddlers
A.R. Beyer Construction	Cardwell Community Church	Couturiere De Victoriana
Ace Hardware	Cardwell Store	Covenant Community Church
Adam's Transmission	Carquest-Mtn West Automotive	Cozy Mountain Quilts
Advanced Cranial Sacral Therapy	Cartridge World/Empire Office	Creative Memories
Al's Mobile Glass	CDV Taxidermy	Curlew Cattle Co
Anderson's Horseshoeing	Cedar Hills Taxidermy	Custom Molding & Saw Works
Andy's Mobile Swiss Mechanic	Chic Shack Out Back	Custom Taxidermy
Ann's Accounting	Chief Motel & Tavern	D & N Contracting & Drywall
Antler Construction	Chinese Garden	Davis Excavation
Appliance Doctor	Chips-R-Us	Davis Sales & Service
Armstrong Angus Ranch	Clays in Calico	DB Plumbing & Excavating
Arrowhead Reclamation	Clean Solutions	DC Carpentry
Asten Center	Cliff's Auto Service	DD's Tax Service
Aware Inc.	Cloth Comfort Diaper Service	Design My Mind
Bausch Potato	Cogdill Auctioneering	Designs of the Times
BB's Sports Arena	Cole's Special Services	Designs Unlimited
Bear Claw Antiques	Common Cents Accounting	DL Custom Leather
Bighorn Boots	Community Thrift & Pawn	DTS Construction
Blooming Blessings	Compass Professional Services	Dysfunctional Quilter
Bowman Appliance Service	Conda Mining	Elk Ridge Building Specialties

Environomics	Inspiration, Treasures & Tea	LJ's Barber & Styling
Farmer's Insurance	Integrated Symatics Therapies	Lori's Labradors
Fischer Income Tax & Bookkeeping	Intermountain West Energy	Lucky J Mini Storage
Fish Creek Electric	Iron Wheel Guest Ranch	Lucky Lil's Casino
Fish Creek House B & B	J D Law Firm PC	Madsen Cabinets
Francor, Inc	Jane's Hair Design & Tanning	McCloskey's Auto Electric
Fredrickson Ranch	Jardine, Morris & Tranel	McGrew Machine & Fabricating Inc
Freman's Auto	Jefferson IGA	McLean Plumbing & Heating
Full Circle Tire	Jefferson Local Development Corp	McLeod Realtors
Generations Salon	Jefferson River Camp	Meadowlark Manor
Gentor Resources	Jefferson Valley Auto NAPA	Medallion Cruises and Tours
Get The Picture	Jefferson Valley Baptist Church	Medley Market
Gillespie Custom Work (Bill)	Jefferson Valley Museum	Medusa; Solved
Gnerer Woodworking	Jess Right Massage	Melissa Stratton Photography
Golden Mine Lounge & Casino	Johnson Custom Fencing	Meriweathers Gallery & Gift
Golden Sunlight Mine	K & L Mortuary	Mint Bar
Gone To The Dogs	K Line Irrigation	Montana Highland Lamb
Grinders' Espresso	Kastle Electric	Montana Livestock Ag Credit
Groy Appraisal Service	Kenworthy Electric Inc.	Montana Mobile Cabins
H Double C	Kickn Productions	Montana Property Consultants
Happy Feet Reflexology	Kountz Fencing	Montana Real Estate Hunter
Harlow's Bus Service	Kristi's Kiddie Korner	Montana Sage Realty
Henningsen/Burns Insurance Agency	La Casa Trailer Park	Montana Web Designs
High Country Ag	LaHoods	Montana's Best Meats
High Peaks Federal Credit Union	Laser Star	Mountain Sage Construction
Hiniker Construction	Lewis & Clark Caverns	Mountain States Drive Train
Horse Fly Equine & Equipment	Liberty Place, Inc.	Mountain View Real Estate
Hunt Angus	Library	MRK Weed Control

MT Web	Smith Supply, Inc.	Wagner Landscape Construction
Nelson Sprinkler Systems	South Boulder Ranch LLC	Wagner's Nursery & Landscapes
New York Life	Split Diamond Ranch	Warmoth Enterprises
Nicholl's Excavating, LLC	Star Theatre	Wax Wings Studios
Northwestern Energy	State Farm Insurance	Western Veterinary Service
Parrot Castle Enterprises	Steele's Furniture	Whitehall Baptist Church
Patti's Garden	Subway	Whitehall Body Shop
Petticoat Junction	Summit Valley Turf	Whitehall Boot & Shoe Repair
Phillips Concrete, LLC	Super 8 Motel	Whitehall Cable
RAC Construction	Sweet Things & Espresso	Whitehall Cellular
Ranching Traditions	T & D Construction	Whitehall Chiropractic
Red Apron Catering	Tamietti House Moving & Construction	Whitehall Community Center
RL Insulation Inc.	Tebay Contracting Services	Whitehall Dental
Rock and Roll Drywall	Telesystem Services	Whitehall Drug
Rocky Mountain Bank	The Local Shop	Whitehall Farmer's Market
Roper Lanes & Lounge	The Ranch B & B	Whitehall Laundromat
Rural Television Systems	The Shaggy Dog	Whitehall Ledger
S & K Custom Moldings & Saw Works	Thompson Distributing, Inc.	Whitehall Liquor
S & S Roofing	Tona's Treasures	Whitehall Medical Clinic
Sacry Electric	Town Pump	Whitehall Pool
Sage Mountain Center	Trapline Lodges	Whitehall School District #4-47-2
Star Junction	Truzzolino's	Whitehall Transportation
Security Storage	Two Bit Saloon & Grille	Whitetail Creek Motel & RV Park
Selina Memorial Animal Rescue	Vaughn Professional Finishes	Wild Game Processing
Seventh Day Adventist Church	Veterans of Foreign Wars	Wild Horse Construction
SFR Corporation	Vigilante Electric Co-Op	Wild Prairie Farms
Shooting Stars Technical Services	Volz Carpet Cleaning	Wolf Ford
Shotgun Construction	W Brand Products	Wolverine Excavation

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